



Equality, Diversity and Inclusion Strategy With Equality Objectives

2022/2026



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Setting the Context

Over the past few years there has been a series of seismic issues that have impacted us all, however some people have suffered more due to the inequalities and barriers that our society, our country, and our institutions have failed to address to date.

The pandemic evidenced that women, working-class people, disabled people and members of our Black, Asian and Minority Ethnic (BAME) communities remain vulnerable and have been hit disproportionately hard by a virus that has preyed on existing inequalities and injustices to deadly effect. Indeed, COVID-19 has laid bare the deep structural flaws in our society and economy, underlining the urgency of addressing the root cause of these in order to build a fairer, more equal society in its aftermath where the difference between health outcomes and life experience is never again determined for instance by someone's gender, sex or skin colour.

Two years have passed (25/05/20) since George Floyd (an unarmed African American man) was murdered during an arrest by a white police officer. This 'watershed' moment captured the mood and sparked action around the issue of racism across the west, rekindling the "Black Lives Matter" movement of networks of grass-roots organisations, and a moral collective of activists.

We have also witnessed the global phenomena of the "Me Too" movement that went viral (#metoo) and woke up the world to the problem and extent of sexual violence. The movement gained the support of communities of survivors of sexual violence to 'speak up' to highlight and disrupt systems that ignored and allowed sexual violence to occur without any accountability.

With what has happened and the stark reminders above of the last few years, we have so much to do bring about equity, prevent discrimination, challenge abuse of power and to be genuinely inclusive. As an Organisation here to serve our whole community, with a mission to deliver universal high quality and seamless access to the NHS we look to this strategy to help us achieve "the change that we want to be" with authentic collaboration and co-production with our staff, the population we serve and our strategic partners.

Yours sincerely,
Chair
CEO
Chief People Officer



**Professor
Sir Keith Willett**
Chair



Will Hancock
CEO



Melanie Saunders
Chief People
Officer

Introduction – Developing the Strategy

To achieve our ambitions, we have developed our Equality, Diversity & Inclusion Strategy for 2022-2026.

This will contribute to the delivery of our vision and goals over the next few years, the strategy also sets out our new equality objectives. This strategy together with our Equality Objectives sets out a clear local approach that everyone in our trust will take to ensure that we embed effective equality, diversity & inclusion practices, policies, and behaviours in everything we do. This will include how we deliver our services, the experience of our patients, carers and staff, how we engage and how we ensure fairness. The content of this strategy and the supporting priority work programmes have been developed through a range of sources.

This includes:

- Quantitative information we collect and monitor through our workforce information
- Feedback through our engagement, involvement and survey activities with staff, the public and national/regional organisations
- Feedback through our staff engagement surveys
- National drivers of best practice guidance and benchmarking

This strategy covers the full range of priorities in respect of inclusive leadership, patient experience, patient access and representation, and engaged people (staff and volunteers). This document provides a managerial framework for describing our ambitions and priorities which will be adapted to feel real and meaningful for different audiences. They are aligned with Our Values based behaviours (Figure 1) and also the NHS People Plan (Table 1). The ED&I strategy will work alongside and support the Corporate strategy and Our People strategy.



Figure 1 SCAS Values based behaviours



Caring

Compassion for our patients, ourselves and our partners



Professionalism

Setting high standards and delivering what we promise



Innovation

Continuously striving to create improved outcomes for all



Teamwork

Delivering high performance through an inclusive and collaborative approach

The National Context

Health is determined by a complex mix of factors including income, housing and employment, lifestyles and access to health care and other services.

Significant inequalities in health exist between individuals and different groups in society. In particular, there is a 'social gradient' in health; neighbourhood areas with higher levels of income deprivation typically have lower life expectancy and disability-free life expectancy. The Regional statistics (appendix 3) from the regional Joint Strategic Needs Analysis (JSNA) provides information on some key population trends.

On top of the pre-existing disparities, health inequalities have been compounded for some groups of people during the global COVID-19 pandemic. With the publication of Public Health England (PHE) reports on disparities for COVID-19 outcomes and stakeholder feedback - Beyond the Data, there is clear evidence that COVID-19 does not affect all population groups equally. For example, many analyses have shown that older age, ethnicity, male sex and geographical area, are associated with the risk of getting the virus, experiencing more severe symptoms and higher rates of death.

This is a time of great transition for the NHS nationally and in the trust locally in terms of organisational and cultural change, financial challenges and required improvements in productivity. In order to meet these challenges, delivery of our services in a culture that promotes and values equality, diversity and inclusion with our patients, carers, public, staff and volunteers is crucially important. There are many internal and external levers that give us a clear direction for delivery and compliance.



Legal drivers include:

- Equality Act 2010 and the Public Sector Equality Duty to show due regard to eliminating unlawful discrimination, advancing equality of opportunity and promoting good relations between those sharing a protected characteristic and those who do not.

To demonstrate compliance with the Equality Act, organisations report annually through the:

- Workforce Race Equality Standard (WRES)
- Workforce Disability Equality Standard (WDES)
- Gender Pay Analysis report
- Annual Public Sector Equality Duty report (within the Annual Corporate report)

Other frameworks that help with compliance against the Equality Act include the Equality Delivery System (EDS2 & EDS 2022), the Accessible Information Standard and the Website Accessibility Standard (Accessibility Regulations 2018).

- Human Rights Act 1998, including core values associated with fairness, respect, equality, dignity and autonomy (FREDA principles).
- Health and Care Bill 2021.
- Health and Social Care Act 2010.
- Public Services (Social Value) Act 2012.
- Modern Slavery Act 2015.



National and regional policy drivers include:

- The NHS Constitution – notably its commitment to ensuring fair access to services for all, regardless of circumstances or personal characteristics – targeting resources at those experiencing poorer health outcomes when compared with the rest of the population.
- NHS Long Term Plan – with its emphasis on flexibility and responsiveness to local need through joined up working between health and social care and commitment to ‘develop and embed cultures of compassion, inclusion and collaboration’.
- The Messenger report - advocated a step-change in the way the principles of equality, diversity and inclusion (EDI) are embedded as the personal responsibility of every leader and every member of staff. EDI should become a universal indicator of how the system respects and values its workforce, and the provision of an inclusive and fair culture should become a key metric by which leadership at all levels is judged. The report also suggested that given the clear benefits of cross-boundary teamwork and collaborative behaviours, everything should be done to encourage greater parity of esteem, conditions and influence between sectors. The report recommended the 7 actions below (which have been incorporated into the Equality Objectives Action plan within Appendix 1):
 - 1 Targeted interventions on collaborative leadership and organisational values
 - 2 Positive equality, diversity and inclusion (EDI) action
 - 3 Consistent management standards delivered through accredited training
 - 4 A simplified, standard appraisal system for the NHS
 - 5 A new career and talent management function for managers
 - 6 Effective recruitment and development of non-executive directors (NEDs)
 - 7 Encouraging top talent into challenged parts of the system
- The NHS People Plan pledges to to build a ‘compassionate and inclusive culture’ to ‘value our people and create a sense of belonging’. The NHS Promise has 7 components, they are:

Table 1 NHS People Promise

SCAS staff	Our Pledge	
We are compassionate and inclusive	<p>We are kind and respectful. We all feel the pressure at times, but we care for each other, as we care for our patients.</p> <p>We don't tolerate any form of discrimination, bullying or violence, and call out inappropriate behaviour</p>	
We are recognised and rewarded	<p>We are recognised and appreciated – whether a simple thank you for our day-to-day work, or formal recognition for our dedication.</p> <p>We have a fair salary, competitive pension, and an attractive package of extended benefits, whatever our role</p>	
We each have a voice that counts	<p>We all feel safe and confident when expressing our views. If something concerns us, we speak up, knowing we will be listened to and supported.</p> <p>Our teams are safe spaces where we can work through issues that are worrying us.</p>	
We are safe and healthy	<p>We're considerate of each other's time and mindful of each other's workload and the physical and emotional impact this can have. While we may choose to go the extra mile to deliver exceptional care, we still look after ourselves and each other.</p>	

SCAS staff

We are always learning

Our Pledge

Opportunities to learn and develop while working for the NHS are plentiful. Our management and supervision are first class – with regular reviews of workload, and opportunities for two-way feedback and appraisals – to ensure we are able to realise our potential.



We work flexibly

Our work doesn't mean we have to sacrifice family, friends or interests. Predictable working patterns and hours, that we have a say in agreeing, make a real difference to our lives and our wellbeing. That's why we have access to new rostering technology that lets us take more control over when we work.



We are a team

SCAS is first and foremost one huge NHS team. Regardless of our role, experience or background, if we work for the NHS, we are part of that team. We are united by a desire to provide the very best care and support not just to those using our services, but to each other.



- NHS People Plan is organised around four pillars

1 **Looking after our people –**
with quality health and wellbeing support
for everyone

2 **Belonging in the NHS –**
with a particular focus on tackling the
discrimination that some staff face

3 **New ways of working & delivering care –**
making effective use of the full range of our
people's skills and experiences of discrimination
that some staff face

4 **Growing for the future –**
how we recruit and keep our people,
and welcome back colleagues who
want to return.

- COVID-19 – Phase 3 Letter– which required organisations to ‘take account of lessons learned during the first COVID peak’, namely its effect on different communities and staff members, the persistent health inequalities it exposed and the need to plan recovery in a planned and inclusive manner.
- The Model Employer sets out an ambition to increase black and minority ethnic representation at all levels of the workforce by 2028. This ambition has been expedited by the NHS People Plan 2020 to increase senior leader representation by 2025 to equate to either the organisational or community percentage, whichever is highest.
- Health and Care Bill, which sets out the statutory ICS arrangements, including an ICS Partnership bringing the NHS together locally to improve population health and care.
- Turning the Tide Strategy: The SCAS ED&I strategy will enable our regional partners to deliver on the Turning the Tide strategy which is the race equality strategy, in particular: Supporting all staff through sharing learning from risk assessments, post-pandemic support and related health inequalities, sharing good practice, using data, lived experience and disaggregated demographic analysis to understand barriers to workplace equality and improving representation by ethnicity and gender across pay bands, whilst developing inclusive leadership behaviours.



Our Equality Objectives 2022-26

The purpose of the equality objectives is to help us make a real difference to some of the most pressing issues facing the protected groups that we provide services for and employ.

They will also help us demonstrate how we are meeting our statutory duties.

Our Equality, Diversity and Inclusion Strategy together with our equality objectives are based on the requirements of the NHS England and NHS Improvement Equality Delivery System (EDS2 and the updated EDS 2022), the NHS People Plan, the NHS People Promise and the NHS Long Term Plan and underlined by the SCAS Values based behaviours.

This supports the aim to embed equality into all policies and practices whilst moving forward with equality performance and going beyond legislation. We feel by adopting the EDS's (EDS 2 & updated EDS 2022) Goals within our Equality Objectives, the strategy will provide the Trust one clear action plan which avoids duplication, and which is aligned to national and local regional priorities (context highlighted above). It also allows a flexible approach on which services and activities we assess depending upon current priorities. The Equality Objectives will not be 'static' for four years. They will evolve to stretch the ambition and achievements of the Trust.

To achieve our ambition and embed the equality and diversity in everything we do, we will focus on four main areas listed below to cover the next four years and the outcomes which are required to deliver each objective are detailed in the Appendix 1:





Objective 1 – Inclusive Leadership

Having strong, compassionate, inclusive and committed leadership will be critical to our success and achieving the ambitions of this strategy. We will develop, support and hold our leaders to account in managing in a way that embeds and promotes equality, diversity and inclusion. We will continue to ensure that diversity considerations are fully integrated into the “business” of the organisation through our committee structures, documentation, planning processes and the management of risk. We will strive for continuous improvement in all that we do and will benchmark ourselves against best practice.

Objective 2 – Improved Patient Experience

We know positive patient experience is achieved through people being informed and provided with the opportunity to be involved in decisions about their care. We will continue to develop support for staff on how they can effectively involve and engage all patients and carers. The ultimate goal is to secure a good cross-section of people reporting positive experiences about their care. We will make sure concerns and complaints about services are handled respectfully and efficiently and will continue to encourage learning where our standards fall short of expectations.

Objective 3 – Our People (Governors and Volunteers) are broadly representative of the communities we serve and are supported and engaged

We know and believe that to deliver the best possible services and patient experience, our staff, trainees / students, governors and volunteers must represent and feel connected to our patients. We want to fully understand the profile of our people and their experience at work. We will review our approaches to talent management to ensure our staff have equality of access to development programmes, coaching, mentoring and shadowing in order to develop their potential and develop high quality inclusive leaders of the future.

We want our staff and volunteers to report a positive experience and believe the Trust is the best place to work or volunteer. We will review our staff feedback and survey results to listen to experience and outcomes from all of our staff and will take steps to understand this further and take action where required. We will focus on a safe and supportive work environment that has zero tolerance to bullying, violence and abuse.

Objective 4 – Better Health Outcomes and Improved Patient Access

We know that a 'one size fits all' approach in the delivery of our services directly leads to inequality and that no matter how difficult this may be to implement at times it should never be overlooked. We will make sure that our staff are provided with the right leadership, support and knowledge to be able to ensure there are no inequitable practices. We will continue to close the gap on the personal data we collect on patients to make sure we can accurately identify whether or not there are any trends in patient activity that need to be looked into further.



Equality and Diversity – Moving beyond compliance (the evidence base)

We need to move beyond compliance, providing evidence that we are being proactive and heading in the right direction.

We need to be in a position where equality and inclusion for all is evident in all that we do as a trust. Meeting legislation 'is the floor and not the ceiling' the aim is to embed an inclusive culture so that Equality, Diversity and Inclusion are authentic, common and enable everyone to thrive.

There is a strong evidence base that shows us that where there is the integration of equality measures trusts achieve improved services, there is a positive impact on patient outcomes and there is an improvement in financial efficiency. Our services need to be consciously and spontaneously considering the needs of all different patients and carers in day-to-day practice at all times, ensuring that where there are gaps in knowledge they are actively closed. It is important that all our staff work in a well-led, supportive environment and are involved in decision making with visible, value-based inclusive leaders. Evidence tells us that when we get this right, patient satisfaction and outcomes improve, regulators rate the organisation better, safety improves, staff feel more valued and their well-being improves.

The strategy sets out our commitment to integrating Equality, Diversity and Inclusion within our mainstream activities; whilst demonstrating 'due regard' to the Equality Act 2010 and the Public Sector Equality Duty.



Critical to this approach is to embed equality into all our activities including:

- ✓ Decision-making
- ✓ Policy and strategy development and review
- ✓ Budget planning and allocation
- ✓ Service planning and review
- ✓ Projects and work programmes
- ✓ Commissioning and procurement
- ✓ Quality and performance improvement
- ✓ Workforce – employee performance, development and relations
- ✓ Involving local people



These have been unprecedented times with the impact of COVID-19 which has compounded some of the health and wider inequalities that persist in our society. It has become increasingly clear that COVID-19 has had a disproportionate impact on many who already face disadvantage and discrimination. The impact of the virus has been particularly detrimental to people living in areas of high deprivation, on people from Black, Asian and minority ethnic communities (BAME), and on older people, men, those with a learning disability and others with protected characteristics.

A central part of responding to COVID-19 and restoring and maintaining services is to increase the scale and pace to tackle health inequalities to protect those at greatest risk.



Our People

Through implementing the NHS People Plan we can focus on how we must all continue to look after each other and foster a culture of inclusion and belonging, as well as take action to grow our workforce to reflect the communities we serve, train our people, and work together differently to deliver patient care.

By committing to our policy of encouraging equality of opportunity and diversity. The Trust values differences between members of the community and within its existing workforce and actively seeks to benefit from their differing skills, knowledge, and experience in order to provide an exemplary healthcare service. As of 31 March 2022, the Trust employed a total of 4412 staff of those:

54%

of our workforce
are women

5.1%

of our staff are from
Black, Asian or Ethnic
(BAME) and mixed
heritage backgrounds

27.8%

of our staff are over
fifty-one years of age

5.4%

of our staff declare a
disability at the point
of recruitment

6.7%

of our staff are Lesbian,
Gay, Bisexual, Transgender
(LGBT+)

44.9%

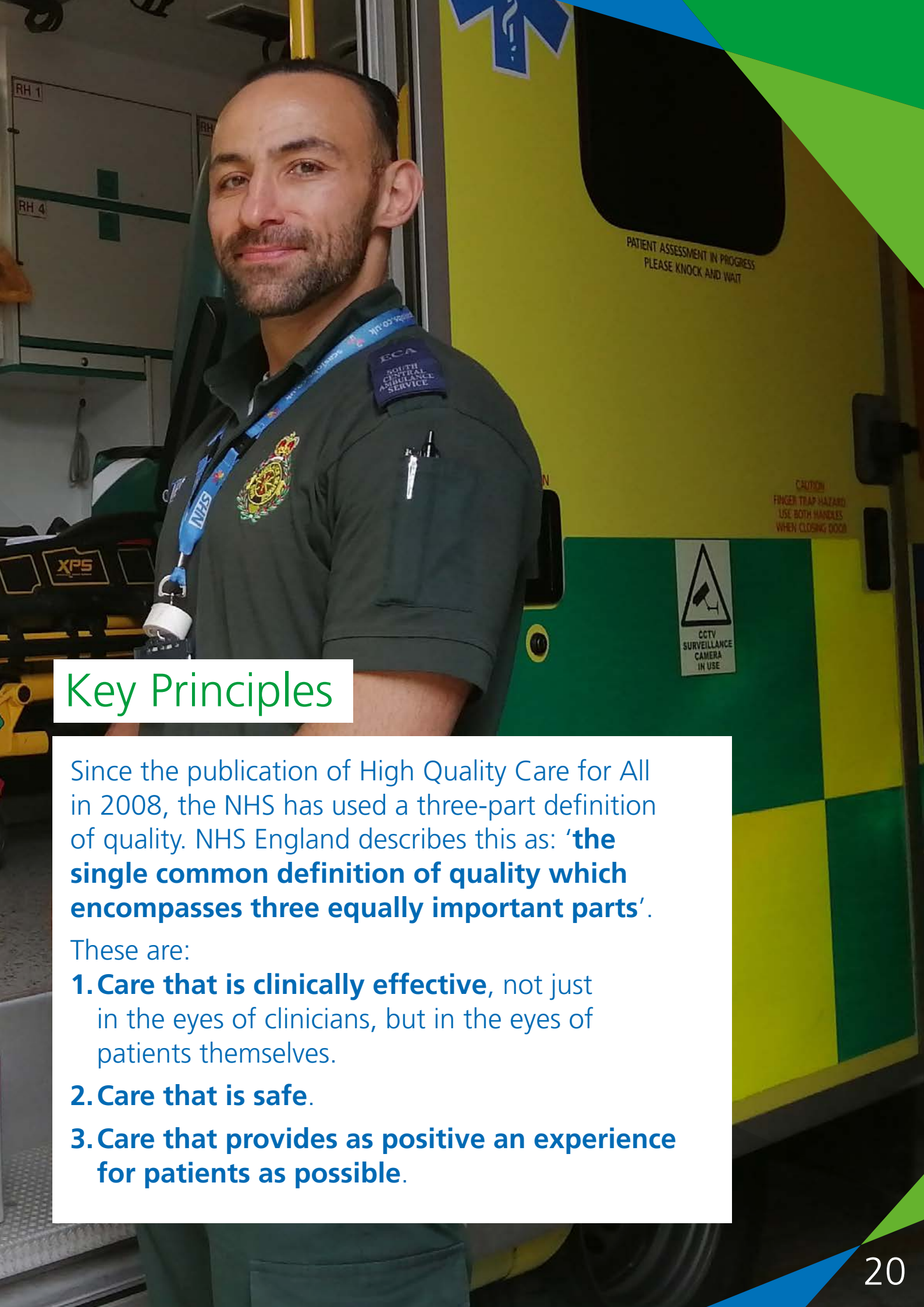
of staff follow the
3 largest religions
(Christianity, Islam
& Hinduism)

Our Ambitions

Our goals clearly state that we want to be regarded as the leader in providing high quality, safe and caring health and care services as well as being the best place to work for staff and volunteers. To achieve this, it is critical that we continue to:

- ✓ Improve the quality and consistency of patient access and experience
- ✓ Deliver better health outcomes for all
- ✓ Ensure our people are representative of the patients we deliver services to
- ✓ Ensure our people have a positive experience at work, are offered opportunities to meet their full potential, and demonstrate the Trust's values
- ✓ Ensure our commitment and leadership in creating an environment that promotes and celebrates diversity and inclusion and embeds this in all that we do





Key Principles

Since the publication of High Quality Care for All in 2008, the NHS has used a three-part definition of quality. NHS England describes this as: **'the single common definition of quality which encompasses three equally important parts'**.

These are:

- 1. Care that is clinically effective**, not just in the eyes of clinicians, but in the eyes of patients themselves.
- 2. Care that is safe.**
- 3. Care that provides as positive an experience for patients as possible.**

In developing this strategy, we have agreed a set of core principles that underpin the development and delivery of our ambitions and priority areas. The principles are:

- ✓ We will ensure that the delivery of the best patient care is at the centre of what we do
- ✓ We will regularly review the priorities through feedback and information to ensure they are grounded in reality for patients, public, staff and volunteers
- ✓ We will measure and publish progress against our priorities annually and publish on our website and intranet
- ✓ We will share and celebrate examples of improvements and changes made as a result of the feedback and the priorities in the strategy
- ✓ We will benchmark our activities in line with best practice models and accreditations both internally and externally to the NHS
- ✓ We will work in partnership and collaboratively with stakeholders, partners and communities to take forward this strategy
- ✓ We will strive for continual improvement and change by using continuous improvement (CI) tools using a recognised Quality Improvement methodology.
- ✓ We will ensure our policies, processes and systems are supportive and monitored to ensure the delivery of good practice in equality and diversity
- ✓ We will role model diverse and inclusive people practices at all levels of leadership

Delivering the Strategy

Presenting and Promoting the Strategy

As a Trust we have to ensure that we have robust policies and procedures in place which ensure that all of our staff and our patients are treated fairly and with dignity and respect.

The Equality, Diversity & Inclusion Strategy provides a framework for describing our ambitions and priorities. It is critical that patients, the public, staff and volunteers feel a sense of reality and connection with what we are striving to achieve. We will promote and review the strategy in the most meaningful ways to ensure it becomes real. This will include presenting the ambitions and commitments within the strategy in different formats and as part of forum events. We will also use staff and patient case studies and stories to share experiences.



Roles and Responsibilities

All staff have a responsibility within the strategy for ensuring we achieve our ambitions for patient safety, quality and experience and the best place to work and train.

We all have a responsibility for ensuring that we role model in the way we work and interact with our patients, the public and our colleagues. In particular we want all those involved in the leadership and management of people, for example, heads of services, supervisors, team leaders, senior leaders and Trust board members, to be visible, fair, inclusive and to demonstrate positive behaviours. We will support our managers to lead in a way that promotes equality, values diversity and embeds inclusion.

To achieve this we will provide information, tools and resources to enable our managers and leaders to feel informed, confident and skilled in supporting and promoting equality & diversity. We will also celebrate good practice against these qualities and hold to account those who do not demonstrate these values and behaviours.



How will we measure progress?

To successfully embed our Equality, Diversity & Inclusion strategy, it is important that we demonstrate that we are monitoring and measuring the improvements we are making.

Some of these measures will be mandated to us and others will be local measures of progress and success. We will publish our progress against these measures to ensure visibility for patients, the public and our staff. Individual work programmes will have their own milestones and measures but collectively we will focus on:

- Information monitored and reported as part of the Public Sector Equality Duty Annual Information Report (included with the Trust's Annual report)
- Assessment and compliance with our Equality Objectives
- Progress against the Workforce Race Equality Standard and the Workforce Disability Standard
- Patient Feedback through Surveys, Complaints, Comments & Compliments
- Response rate and results of Staff Surveys and Feedback
- Results and real time indicators of Staff Experience programmes
- Metrics including Appraisal Rates, access to training opportunities and completion of appropriate training
- Monitoring of cases of bullying, harrassment and abuse of power
- Feedback from exit interviews
- Benchmarking data from other NHS Trusts
- Relevant feedback from CQC inspections and assessments



How will we oversee progress and review the strategy?

The delivery of the Strategy will be overseen by the Equality, Diversity & Inclusion (ED&I) Steering group chaired by the CEO and the People and Culture Committee.

The Steering group is responsible for setting the strategic direction of the agenda, monitoring its delivery and championing the values and behaviours of the Trust. The Committee receives assurance that the trust is meeting its legal obligations in relation to equality and diversity and delivers improvement activity as required. The Steering group and the Committee is governed and directed by its Terms of Reference and accountable to the Trust board.

The Steering group and the Committee will review progress against planned priority areas in line with agreed actions and timescales as well as feedback from ongoing engagement activity. Six monthly reports comparing progress with our ambitions will be published and reported to the Equality, Diversity & Inclusion (ED&I) Steering group and the People and Culture Committee with an annual report to the Trust Board. We will also report on progress as part of the Trust's Annual Report as required by the Equality Act 2010 (specific duty).

Appendix 1: Implementation Plan

Equality, Diversity and Inclusion Objectives 2022 – 2026 – Action

Objective 1 – Inclusive Leadership

Having strong, compassionate, inclusive and committed leadership will be critical to our success and achieving the ambitions of this strategy. We will develop, support and hold our leaders to account in managing in a way that embeds and promotes equality, diversity and inclusion. We will continue to ensure that diversity considerations are fully integrated into the “business” of the organisation through our committee structures, documentation, planning processes and the management of risk. We will strive for continuous improvement in all that we do and will benchmark ourselves against best practice.

Specific Objectives	Lead/s	Actions Assessment	Criteria
Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations	Board	Leadership of Trust agreed to, understand and promote the Trust’s strategic approach to the Public Sector Equality Duty and the impact of the Trust’s role as a major stakeholder within the communities and regions served Establish executive sponsors (champions) for BME, disability, Multi-faith and LGBT+ staff networks	<ul style="list-style-type: none">• Evidence of the Board seeking assurance or updates on statutory documents published and Board actions completed therein• Evidence of EQIA completed to be added to the Board front sheet to provide further assurance to the board
Papers that come before the Board and other major Committees identify equality-related impacts including risks, and say how these risks are to be managed	Board	All papers must be accompanied by an Equality Impact Analysis (EQIA) Revive the ED&I Steering Group and set up regular meetings	

Specific Objectives	Lead/s	Actions Assessment	Criteria
Middle managers and other line managers support their staff to work in culturally competent ways within a work environment free from discrimination	HR OD People & Culture	<p>The Middle Management understands their commitment to promoting equality throughout the Trust and the local health economy by ensuring that the potential equality implications of issues under consideration are addressed throughout decision making processes</p> <p>The Trust is promoting a Just and Learning culture</p> <p>Roll out a campaign on 'Civility'</p> <p>Implement People Voice- 'You said, we did'</p> <p>All papers to include Equality Impact (EQIA) Analysis re: Service/ Policy changes</p> <p>Staff networks to be promoted at Induction</p> <p>Recruitment strategy to include attracting applicants from all protected characteristics. Recruiting managers to be briefed accordingly</p>	<ul style="list-style-type: none"> • To actively reduce BAME staff personally experiencing discrimination at work from a manager / team leader or other colleagues to 5% (from 16.7%) • Assess & grade for all protected groups the extent to which staff are supported within the workplace
Implement Messenger report recommendations	HR People & Culture Committee ED&I Committee Steering Group	<p>1. Targeted interventions on collaborative leadership and organisational values</p> <p>2. Positive equality, diversity and inclusion (EDI) action</p> <p>3. Consistent management standards delivered through training</p>	<p>Implementation of national entry-level induction for all who join</p> <p>And the new, national mid-career programme for managers, following the Messenger review</p>

Specific Objectives	Lead/s	Actions Assessment	Criteria
		<p>4. A simplified, standard appraisal system or Personal Development Review</p> <p>5. A new career and talent management function for managers</p> <p>6. More effective recruitment and development of non-executive directors</p> <p>7. Encouraging top talent into challenged parts of the system</p>	<p>Embed inclusive leadership practice as the responsibility of all leaders</p> <p>Commit to promoting equal opportunity and fairness standards. More stringently enforce existing measures to improve equal opportunities and fairness</p> <p>A single set of unified, core leadership and management standards for managers. Training and development bundles to meet these standards</p> <p>A more effective, consistent and behaviour-based appraisal system, of value to both the individual and the system</p> <p>Help in the creation of a new career and talent management function at regional level, which oversees and provides structure to NHS management careers</p>

Specific Objectives	Lead/s	Actions Assessment	Criteria
			<p>Establishment of a fair and inclusive recruitment and appointments checklist</p> <p>Improve the package of support and incentives in place to enable the best leaders and managers to take on some of the most difficult roles</p>
Diverse Board representation	HR Board	<p>From our statistics (from the most recent WRES 2021) regarding Board representation as compared with Black & Minority Ethnic (BAME) staff representation it is a positive figure (20% of the Board are BAME as compared with 5.2% of staff), the Board representation is even higher than our most diverse county (Oxfordshire at 16%). However, these figures can be 'skewed' as absolute numbers can be small and any changes will increase/decrease percentages significantly</p> <p>SCAS recognises that leadership positions are highly pressurised jobs where a great deal of personal and professional resilience are required to succeed. The mere action of appointing diverse leaders to senior and Board positions does not remove the challenges they have faced throughout their careers</p>	<p>Personal support BAME leaders require more tailored and intensive support as they overcome the challenges (including discrimination), they face in accessing and retaining the most senior and Board level roles</p> <p>Explore and develop Mentoring schemes involving both Board and leaders from outside the health service, and be designed in collaboration with existing BAME leaders, to ensure that they address the right areas of need</p>

Specific Objectives	Lead/s	Actions Assessment	Criteria
		<p>We need to be cognisant of these continuing challenges and mitigate against them by ensuring robust support that does not end with the induction process, particularly as we wish not to just maintain but grow a diverse Board. We will be putting better processes in place to support future and current BAME leaders</p> <p>View & extend to all protected characteristics within a 5-year time frame</p>	<p>Recruitment and retention</p> <p>Specific succession planning and talent development schemes are developed to enable BAME leaders to move their careers forward. Re-value our recruitment, with required skills, roles and experiences described in more inclusive ways, along with better community engagement encouraging a diverse pool of applicants</p>

Objective 2 – Improved Patient Experience

We know positive patient experience is achieved through people being informed and provided with the opportunity to be involved in decisions about their care. We will continue to develop support for staff on how they can effectively involve and engage all patients and carers. The ultimate goal is to secure a good cross-section of people reporting positive experiences about their care. We will make sure concerns and complaints about services are handled respectfully and efficiently and will continue to encourage learning where our standards fall short of expectations.

Specific Objectives	Lead/s	Actions Assessment	Criteria
People, carers and communities can readily access Ambulance, PTS, hospital, community health or primary care services and should not be denied access on unreasonable grounds	Contracts	Implement NHS standard contract which has very specific requirements around Equity of Access, Equality and Non-Discrimination. The specifics are within SC13 Equity of Access, Equality and Non-Discrimination	<ul style="list-style-type: none"> • Evidence of one or more service / care setting which suggests that there is significant local equality progress for people in relation to:
	Translation service	The Trust commission a translation and interpreting service and will be looking at innovative Apps that help with communication between patients and staff	<ul style="list-style-type: none"> – Access to services
	Patient Experience	Improve the experience of people with disabilities who use our services	<ul style="list-style-type: none"> – The information and support people receive, so that they can be involved in decisions about them
	Communications	The Accessible Information Standard, directs and defines a consistent approach to identifying and meeting the information and communication support needs of patients, service users and carers where those needs relate to a disability, impairment or sensory loss. This includes (but is not limited to) people who are blind, Deaf, deaf-blind and /or who have a learning disability, aphasia, autism or a mental health condition which affects their ability to communicate	<ul style="list-style-type: none"> – People's experiences – Handling of complaints

Specific Objectives	Lead/s	Actions Assessment	Criteria
	Patient Experience Communi-cations	Ensure that the Trust listens to and engages with patients, providing some assurance that the patient voice is included in all the work of the Trust and the patient viewpoint can be expressed at the Governing Body meetings	<ul style="list-style-type: none"> • For all protected groups, we have to assess and grade how well: – Services are accessed, taking into account the fairness of reasons when access is denied
People are informed and supported to be as involved as they wish to be in decisions about their care	Patient Experience	Families are a part of the decisions regarding their children and empowered to voice their views That Trust staff put the child/ young person and their family at the centre of any decisions made Mental Health - All individuals are encouraged whenever possible to be involved in the decision making as to where and how their care is delivered Accessible Information Standard to be fully implemented and promoted to staff	<ul style="list-style-type: none"> – People are informed and supported – Service is experienced. – Complaints are handled • Evidence of how well other disadvantaged groups, including inclusion health groups fare compared with people overall
People report positive experiences of the service they receive	Patient Experience	Embed a culture of civility and promoting a Just & Learning Culture NHS organisations have a duty under Section 14Z2 of the Health and Social Care Act 2012 and the NHS Act 2006 to 'make arrangements' to inform, involve and consult with the public where there is a potential service change.	

Specific Objectives	Lead/s	Actions Assessment	Criteria
People's complaints about services are handled respectfully and efficiently	Com-plaints	<p>The Complaints process by which complaints will be handled by the Trust when raised by a user of the service or their representative, or a member of the community who comes into contact with the service by other means or Trust employees. The Trust places high priority upon the handling of complaints and recognises that suggestions, constructive criticisms and complaints can be valuable aids to improving services and informing service redesign</p> <p>The Trust Serious Incident (SI) process outlines the governance arrangements for the performance management of serious incidents requiring investigation SI's and ensure that patient safety and other reportable incidents are appropriately managed in order to address the concerns of patients and promote public confidence</p> <p>All patient complaints are handled in line with the requirements of the NHS Complaints Regulations (2009) and under the Trust's Complaints Policy</p>	

Objective 3 – Our People (Governors and Volunteers) are broadly representative of the communities we serve and are supported and engaged

We know and believe that to deliver the best possible services and patient experience, our staff, trainees / students, governors and volunteers must represent and feel connected to our patients. We want to fully understand the profile of our people and their experience at work. We will review our approaches to talent management to ensure our staff have equality of access to development programmes, coaching, mentoring and shadowing in order to develop their potential and develop high quality inclusive leaders of the future.

We want our staff and volunteers to report a positive experience and believe the Trust is the best place to work or volunteer. We will review our staff feedback and survey results to listen to experience and outcomes from all of our staff and will take steps to understand this further and take action where required. We will focus on a safe and supportive work environment that has zero tolerance to bullying, violence and abuse.

Specific Objectives	Lead/s	Actions Assessment	Criteria
Fair NHS recruitment and selection processes lead to a more representative workforce at all levels	HR	<p>Ensure that Trust leaders have the right skills to support their staff to work in a fair, diverse and inclusive environment</p> <p>Roles are advertised through NHS Jobs and interviewed by panel interview</p> <p>Invite Disabled candidates to interview if they meet the minimum criteria for the role under our commitment to the Disability Confident Scheme</p> <p>Monitor systems and processes in place for fair Recruitment including the WRES & WDES</p>	<ul style="list-style-type: none"> • Evidence that the workplace is representative of staff from all protected groups, taking into account the fairness of recruitment & selection processes. Increase number of BAME staff to reflect population to 19% of workforce from 5.2% • Improve Disability declaration ratio to 15% • Evidence that we have assessed and graded participation in and evaluation of training & development opportunities for staff from protected groups

Specific Objectives	Lead/s	Actions Assessment	Criteria
The NHS is committed to equal pay for work of equal value and expects employers to use equal pay audits to help fulfil their legal obligations	HR	<p>All new or amended job descriptions are evaluated in accordance with Agenda for Change evaluation and job matching processes</p> <p>The Trust support of the principle of equal pay for work of equal value through an Equal Pay Audit</p>	<ul style="list-style-type: none"> • Evidence that we have used equal pay audits to help fulfil our legal obligations. For all protected groups we have to assess & grade the extent to which they receive equal pay for work of equal value
	Head of ED&I	The Trust to publish the Gender Pay reports with associated actions	<ul style="list-style-type: none"> • For all protected groups we have to assess & grade the availability of flexible working options
Training and development opportunities are taken up and positively evaluated by all staff	Education	<p>The Trust to support the development and training needs of staff, and monitor the effectiveness of this using various processes:</p> <ul style="list-style-type: none"> – ED&I training – Mandatory training – Learning & Education Strategy – Team & Organisation development events – Leadership programmes <p>information on Statutory & Mandatory training is held by the Trust on ESR</p> <p>Establish a process for staff recording of non-mandatory learning activities linked to Personal Development Review (PDR), in line with the requirements of the Workforce Race Equality Standard (WRES). All staff and managers have equality and diversity competencies built into their PDR</p>	<ul style="list-style-type: none"> • For all protected groups we have to assess how well membership of the workforce is experienced • Evidence that we have used equal pay audits to help fulfil our legal obligations. For all protected groups we have to assess & grade the extent to which they receive equal pay for work of equal value • For all protected groups we have to assess & grade the availability of flexible working options
	HR		
	OD		

Specific Objectives	Lead/s	Actions Assessment	Criteria
When at work, staff are free from abuse, harassment, bullying and violence from any source	HR FTSU guardian Executives	<p>The Trust have a suite of policies & processes:</p> <ul style="list-style-type: none"> – Freedom to Speak Up – Harassment & Bullying policy – Dignity at work – Staff Surveys – access to independent support and advice <p>Supporting and furthering the Freedom To Speak Up agenda</p> <p>Implement Operation Cavell working jointly with Thames Valley and Hampshire Police Service to act upon and reduce violence from the public</p>	<ul style="list-style-type: none"> • For all protected groups we have to assess & grade how well membership of the workforce is experienced • For all protected groups we have to assess & grade the extent of abuse, harassment, bullying & violence (DATIX) • To reduce BAME staff experiencing harassment, bullying or abuse from staff to 10% or less (from 30.4%)
Flexible working options are available to all staff consistent with the needs of the service and the way people lead their lives	HR	<p>The Trust ensure work-life balance is facilitated by;</p> <ul style="list-style-type: none"> – Policy on flexible working – Hybrid working policy – Carers leave; maternity & paternity; adoption policies – Reasonable adjustments 	<ul style="list-style-type: none"> • Reduce the incidence of BAME staff experiencing harassment, bullying and abuse from patients and the public to 20% or less (from 45.2%)
Staff report positive experiences of their membership of the workforce	OD Health & Wellbeing	<p>We have developed the Trust's Values based behaviours. The staff experience is also a part of the staff survey and used for the WRES & WDES Implement People Voice – 'You said, we did'</p> <p>When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions</p>	<ul style="list-style-type: none"> • Reduce presenteeism for disabled to 10% or less (from 34.5%) • To improve disabled staff satisfaction rates and their work to over 65% (from 36.3%)

Objective 4 – Better Health Outcomes and Improved Patient Access

We know that a 'one size fits all' approach in the delivery of our services directly leads to inequality and that no matter how difficult this may be to implement at times it should never be overlooked. We will make sure that our staff are provided with the right leadership, support, and knowledge to be able to ensure there are no inequitable practices. We will continue to close the gap on the personal data we collect on patients to make sure we can accurately identify whether there are any trends in patient activity that need to be investigated further.

Specific Objectives	Lead/s	Actions Assessment	Criteria
Services are commissioned, procured, designed and delivered to meet the health needs of local communities	Policy leads	Robust equality impact analysis (EQIA) to be undertaken when new services have been commissioned in order to understand the needs of the local communities and service users	<ul style="list-style-type: none"> • Evidence of one or more care pathway which suggests there is significant local equality progress as people transit from one service to another
	Head of ED&I	Embedding considerations for Equality Inclusion and Human Rights into service designs, the Trust ensures that those who deliver services on the Trust's behalf meet the needs of local Communities	<ul style="list-style-type: none"> • Evidence of one or more service / care setting which suggests there is significant equality progress for people's safety
	Patient experience	Collate relevant data and encourage service users to disclose information about their protected characteristics in order to improve facilities and make reasonable adjustments where needed	<ul style="list-style-type: none"> • For all protected groups, we have to assess and grade how well:
	Translation service	The Trust commission a translation and interpreting service and will be looking at innovative Apps that help with communication between patients and staff	<ul style="list-style-type: none"> – Service transitions are made, including how well patients, carers and professionals are kept informed of what is happening
	Head of ED&I		<ul style="list-style-type: none"> – Key aspects of safety are prioritised and managed

Specific Objectives	Lead/s	Actions Assessment	Criteria
<p>Individual and patient population health needs are assessed and met in appropriate and effective ways</p> <p>Transitions from one service to another, for people on care pathways, are made smoothly with everyone well informed</p>	<p>Policy leads</p> <p>Head of ED&I</p> <p>Patient experience</p> <p>Head of ED&I</p> <p>Patient experience</p>	<p>Through the process of Equality Analysis, we will ensure decisions are informed by their impacts on advancing equality, adding social value, reducing health inequalities and increasing inclusion</p> <p>Training and awareness to be provided for all staff (at induction/ team meeting requests) around ED&I</p> <p>Ensure that our patients experience good quality service that is sensitive to their personal and cultural needs as well as receiving effective treatment and care appropriate to their clinical condition</p> <p>Recording of information to be continually improved</p> <p>Work with providers to enhance accessibility for disabled patients by promoting best practice and audit and review of the Accessible Information Standard and use of reasonable adjustments</p> <p>Children and young people are kept informed of issues being addressed and are able to express their views</p> <p>That all professionals put the child at the centre of any decisions made throughout their journey through care</p>	<ul style="list-style-type: none"> • Evidence of how well other disadvantaged groups, including inclusion health groups fare compared with people overall <p>Patients (service users) report positive experiences of the service</p>

Specific Objectives	Lead/s	Actions Assessment	Criteria
When people use our services, their safety is prioritised and they are free from mistakes, mistreatment and abuse		<p>Adult Safeguarding & Children's Safeguarding – The Trust believes that living a life that is free from harm and abuse is a fundamental right of every person. It acknowledges its statutory responsibility to promote the welfare of children and young people and to protect adults from abuse and risk of harm</p> <p>Case reviews and lessons learned in respect to protected characteristics to be monitored</p>	

Appendix 2:

2022-2023 Improvement Plan

We have seen from Staff survey results combined with the benchmarks in the Workforce Race Equality (WRES) and Workforce Disability Equality (WDES) standards that there is still more to do to bring about the changes necessary to embed the inclusive and equitable culture that the Trust aspires to.

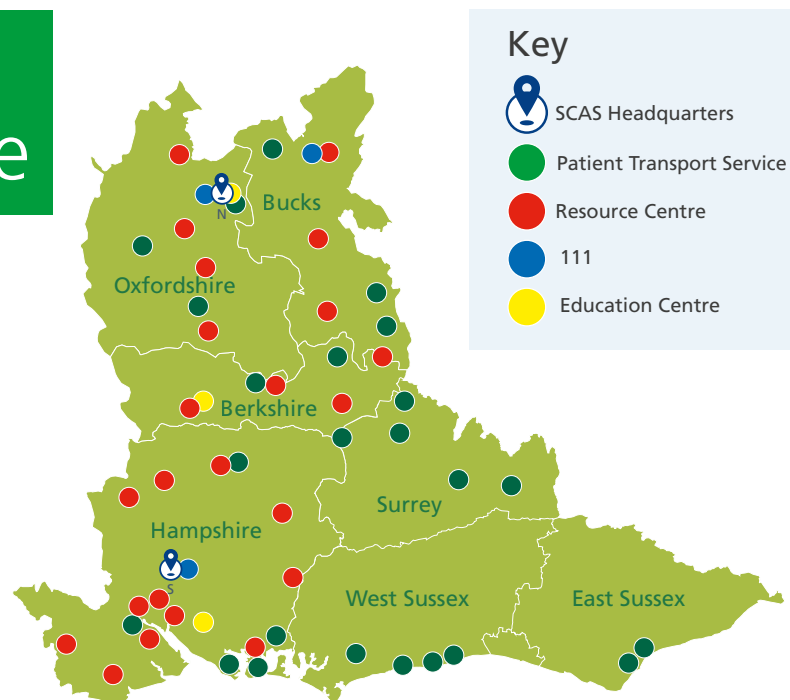
We have challenges in relation to recruitment, harassment and bullying and management of discrimination and representation. Our ambitions will stretch us but remain realistic in order to address these challenges over the next year.

- We will take positive steps through development, training and pushing Continual Professional Development (CPD) opportunities to increase the representation of Black, Asian and Minority Ethnic (BAME) staff Band 7 and above.
- We are committed and will take steps to ensure that our workforce is broadly representative of the communities we serve at all levels of our organisation. We have engaged with the Ethnic Media Group and will continue to reach out to underrepresented groups.
- Make available through working with regional partners an Inclusive Recruitment Checklist to ensure we adopt methods that are fair, accountable, bias-free, advance equality, attract and retain the widest talent pool.
- We will improve the results of the staff survey key findings (in respect of discrimination and equal opportunities) for our BAME staff by a reduction of those reporting experiencing discrimination and improve the score for believing the Trust provides equal opportunities.
- We will work to gain Disability Confident Leaders status and invite Disabled candidates to interview if they meet the minimum criteria for the role under our commitment to the Disability Confident Scheme.
- We will improve the experience of staff, patients and carers with mental health problems by working in partnership with Occupational Health, our Employee Assistance Service and external organisations such as HealthWatch.
- We will be monitoring Disciplinary and Capability cases of BAME staff and those who consider themselves to have a disability in the quarterly board reports. This will help us identify any patterns of behaviours that we may need to provide additional support or reasonable adjustment to before staff enter disciplinary or capability processes.

- We are enabling an inclusive, fair, and equitable Hybrid workplace, that can benefit staff with long-term health conditions and caring responsibilities, and disabled staff. Working safely and securely at home can positively impact on the performance and reduce capability and disciplinary issues.
- To address concerns of Bullying and Harassment from both staff and patients, the Trust is working to build a Just & Learning Culture by raising awareness of issues, working with partner organisations and through education and training of our workforce, interventions included are:
 - The Trust is enhancing its approach to reporting of bullying, harassment, and abuse at work by ensuring those processes are transparent with the implementation of a Just and Learning Culture and the Trust's Dignity and Work policy.
 - We will continue to work closely with our Freedom To Speak Up Guardian and our Staff networks to enable and support our people to speak, listen and follow up on concerns or feedback.
 - The roll out of a Just & Learning culture is focusing on early intervention and restoration of working relationships before problems escalate.
 - The roll out of "Civility Matters", this is a module on our Essential Skills for People Managers which stresses the importance of Civility in the workplace and the impact of incivility. Building on this the Trust will be designing and launching a Civility Matters campaign.
- We will continue to invest in leadership and staff development which advances equality, diversity and inclusion via our leadership development programmes and workforce development solutions.
- Implement Operation Cavell to publicise zero tolerance of bullying and harassment and abuse from patients and the public
- Develop and embed an Active Bystander Programme to address inappropriate and unacceptable behaviours and support an inclusive culture.
- Create Board Champions aligned to the Protected Characteristic and be ambassadors for the Staff Networks

Appendix 3: Regional structure

These are our constituencies Buckinghamshire, Oxfordshire, Berkshire, Hampshire and additionally we provide Patient Transport Services to Sussex & Surrey. These are the communities we serve, a large footprint with a diverse population.



Population Trends	Buckinghamshire	Oxfordshire	Berkshire West	Hampshire
Ethnic Minority representation	13.5%	16%	5.2%	5%
Gender	Male: 49.1%	Male: 49.7%	Male: 49.5%	Male: 48.9%
	Female: 50.9%	Female: 50.3%	Female: 50.5%	Female: 51.1%
Long-term limiting illness	13.4%	18.9%	13.2%	15.73%
Disability-free life expectancy	Male: 69.7 years	Male: 69.7 years	Male: 67.7 years	Male: 65.7 years
	Female: 68.4 years	Female: 69.3 years	Female: 61.5 years	Female: 66.1 years
Age 65+	16.7%	18.5%	19.6%	22.3%
Belief - Christian	60.5%	68%	63.6%	62.4%
No religion	24%	28%	26.7%	28%
Muslim	5.1%	3.7%	0.8%	0.6%
Hindu	1.2%	0.9%	0.7%	0.7%

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