

**Equality and Diversity Steering Group**  
**Minutes of Meeting held on 28 April 2017 in Room 5 John Turner Centre**

**Present**

Ann Pope	AP	Director of Human Resources (Chair)
Rebecca Bennett	RB	Matron
Jatinder Birdi	JB	Chair WDFP
Elizabeth Dixon	ED	Accessibility Adviser
Sharon Elswood	SE	Volunteer Coordinator
Rosemary Pantling	RP	Chaplain
Anne Rouse	AR	Staff Side Representative RCN
Sue Pike	SP	Staff Side Equality and Diversity Lead
Anselme Uwihanganye	AU	UNISON Rep

**In Attendance**

Lindsey Cotterill	LC	Administrator
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<b><u>Minute</u></b>		<b><u>Action</u></b>
1.	<p><b><u>APOLOGIES FOR ABSENCE</u></b></p> <p>Apologies were received from Junaid Hussain – Chief Executive, Helen Lancaster – Director of Nursing and Santosh Kundi - Patient Forum.</p>	
2.	<p><b><u>MINUTES OF PREVIOUS MEETING HELD ON 24 FEBRUARY 2017</u></b></p> <p><u>Accessible Standard Update</u> Page 2, fifth paragraph, third sentence, to be amended to read: “Blue tooth devices had also been purchased...”</p> <p>Subject to the above amendment, the Minutes of the previous meeting held on 24 February 2017 were approved as an accurate record.</p>	
3.	<p><b><u>MATTERS ARISING</u></b></p>	
3.1	<p><u>British Deaf Association (BDA) Charter Signing</u> The charter signing would take place on 17 May 2017. Invites had been sent to all involved with the Task and finish Group. The Charter did not have to be delivered on immediately, however several aspects of the</p>	

work were already being developed.

3.2 Accessible Standard Up-Date

It was noted that this was a busy group with several areas of work ongoing.

New telephones had been purchased and focus was on improving the IT systems. Specific consideration was being given to creating an alert for those with accessibility needs, ensuring that all staff were aware of a patient's needs. Due to the size of the electronic programmer's interface, this would take a substantial amount of work. ED requested commonality around the words used and offered help with this matter. Once Lorenzo alerts were updated, the Alerts Policy would be updated to reflect the changes.

Electronic alerts presented a challenge as the systems used in the community did not link with Lorenzo such as Badger and GAP. Sarah Patrick would be taking this forward once the alerts had been set-up in Lorenzo.

Updates were taking place with regards to the information sent out by the Patient Advice Liaison Service (PALS). The Community division was also updating their intranet page. ED requested that all updates be considered by the Accessible Standard Group to ensure continuity.

The Nursing Documentation Working Group was working to ensure that the nursing documentation across both the acute and community was the same. Within the community, work was also being completed on the Learning Disability Communication Toolkit.

3.3 European Health Diversity Project

AP and SP would be attending the European Health and Diversity conference in Sicily during June 2017 which would have specific focus on training within the Health and Diversity project.

MO offered to provide further information to the group regarding the ongoing work of the project. A European Health Diversity Journal had been created to capture information relating to different ways of working across Europe and other cultures. NHS England had shown an interest in the Trust in relation to its work within the project.

MO

4 AGENDA ITEMS

4.1 DRAFT ANNUAL REPORT 2017

MO presented this draft report, which was taken to the Board of Directors to provide assurance that the Trust was meeting statutory requirements. The report assisted in determining actions for the workforce and also detailed the work of carers and information relating to patients.

### Recruitment

Areas of challenge were recruitment by ethnicity, and the group discussed the difference between applications and shortlisting. The NHS was an international system; however some applications were submitted which did not always fulfill the job requirements to work. The team was asked to investigate the level of objectiveness in the process between applications and selection to interview. Assurance was offered that assessments take place as well as a face to face interview. The team had received selection training. Part of the selection process was verbal communication abilities along with computer literacy. Numeracy skills were also monitored.

The recruitment data within the report did not include figures for the overseas nurses that were recruited as these were head hunted. Furthermore the data collected did not note all staff nationalities.

The Committee discussed whether there was any national guidance on attracting people that represent the demographic population. Assurance was given that there was guidance and the Trust adhered to this.

The Trust offered support to staff from different cultures; training completed within other cultures was different, however the clinical aspects remained the same. Foreign staff were offered help in setting up a bank account and where to get supplies.

### Staff Survey

The Staff Survey results had been received and were excellent. Many aspects were positive and a working group had been established to investigate the Trusts lowest ranking scores. The information gathered by the group would be triangulated with the incident reporting system. The Group expressed surprise that many incidents were reported within physiotherapy and brain injury wards. Acquired brain injuries could lead to the higher level of incidents.

An internal staff survey was planned in relation the low scoring areas. This would be anonymised via Survey Monkey and it was hoped that this would give an understanding as to why staff did/did not report incidents. Furthermore staff understanding of reporting would be considered, i.e. do they report on datex or only to a manager. The survey would also consider whether staff felt that reports and concerns were acted upon.

AP would liaise with Learning and Development to determine whether the Conflict Resolution training was successful in empowering staff.

The Committee discussed whether the recent increase in incidents was related to hate crimes. There was no specific evidence relating to this. Training was included within the Safeguarding training. As and when further information relating to incidents came through, this would be analysed and JB would be contacted should any further advice be needed.

Dementia

A training session had been completed with the Board of Directors with strong lessons included. The trainers had offered to go out on-site and train staff groups if requested as this was too big a topic to be included within Mandatory Training. Information could be found online and staff were welcomed to become Dementia Friends.

Workforce Race Equality Standard

The template for the Workforce Race Equality Standard was being updated with a relaunch planned for June 2017. Next year the Workforce Disability Standard would be introduced.

**4.2 DRAFT PATIENT EDS2 ACTION PLAN 2017**

MO presented the action plan to the group noting the strong actions that it contained and the positive relationship between the Trust and Community. The plan would be taken to the Board of Directors on 24 May 2017 and again in October 2017 to provide an update on the actions.

ED would provide MO with wording for the accessibility section of the plan and members of the group were invited to submit any suggestions to LC or MO.

RP suggested that the use of the word “preacher” be replaced with “chaplain”.

ED

MO

**4.3 DRAFT WORKFORCE EDS2 AND WRES ACTION PLAN**

MO presented this draft which detailed the work of the WRES; who had been invited to make changes to the document. Workforce data and the staff survey had been included and further action was required.

**4.4 UPDATE ON SITE VISITS**

ED presented this update to the Group.

Ema Collier was continuing with the accessibility audits of Trust properties. A template had been produced which detailed access to the building and approaching areas. It was suggested that the audit also consider the parking arrangements and ED and MO would discuss this further.

ED/MO

The audit noted that several buildings did not have hand gel dispensers; however community staff did carry their own gel.

Issues had been raised with regards to toilet doors opening inwards meaning that they were unsuitable for use by wheelchair users.

ED would send a copy of the accessibility audit to Julie Hemming, the South Locality Manager.

An audit of the Medical Education Centre (MEC) was requested. AP would discuss further with ED and MR. Specific consideration would be given to the lift within the building and the toilets. A new toilet block on the Trust site was being considered; and funding was being sourced for a hoist within the toilet. A Changing Places Toilet was the desirable option as this would be beneficial to disabled patients as a local directory was often used to find nearby facilities. ED provided the below document to afford the group further information:

AP/ED/MR



Once all audits were complete, a final report would be produced.

#### 4.5

### **REPORT BACK FROM WORKFORCE RACE EQUALITY EVENT**

MO and AU had attended this event facilitated by NHS England relating to the WRES. A further standard would be released in June 2017.

This event highlighted the preference for 1 or 2 big projects rather than a multitude of smaller actions. This would allow for prioritisation and focus.

Possible actions arising from the event were given. AU detailed the lack of BME staff participating in the survey and explained that a supported environment was needed to allow for the correct information and

conclusions to be gained.

AU would look at establishing a BME network to inform learning locally and identify areas of good practice. Consideration would be given as to where the group met, with invites extended to St Michael's staff. Once the group was ready, a launch event could be held, with AP offering assistance. A project update would be provided at the next meeting in August 2017.

AU

4.6

**ANY OTHER BUSINESS**

Local Events

The Peace Festival would be held on 17/18 June 2017 and the Faith and Equality Conference would be held on 18 November 2017.

Bereavement Care

The Chaplain referred to a post regarding Bereavement Care and praised its identification of faith and spiritual support along with religious awareness. This encouraged staff to contact the chaplaincy regarding patients of different faiths.

The Group was keen to investigate the idea of using a symbol to represent patients receiving end of life treatment. It was noted that there was already a Care of the Dying Patient pathway which promoted faith and end of life questions with patients and families. Furthermore several signs were already in use for various representations of issues and the Group expressed concern that there could be too many signs and the impact would be lost.

Home Support Volunteers

The service had now got 22 volunteers for the Warwickshire area. The Post would be circulated with the group minutes.

LC

6.

**DATE AND TIME OF NEXT MEETING**

25 August 2017 at 10.30am in the Brooke Suite, Warwick Hospital.