

Equality, Diversity and Inclusion Annual Report

2021 -2022



Caring for Walsall together



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Executive Summary

Walsall Healthcare NHS Trust is pleased to present its annual equality and inclusion report for 2021-2022. During the global pandemic, the Equality Human Rights Commission temporarily suspended legal reporting requirements related to the Public Sector Equality Duty (PSED) in recognition of the immense pressure and uncertainty faced by NHS Trusts and their local response to COVID -19. This report has been developed to illustrate the work that has been undertaken over the past twelve months to demonstrate compliance with the three main aims of the Public Sector Equality Duty and highlights the Trust's commitment to continuous improvement with equality, diversity, and inclusion for the benefit of staff and the patient population of Walsall.

2021 has been a year of significant change and opportunities for the Trust as the organisation continued to transform ways of working, whilst responding to the COVID-19 pandemic. In the summer of 2021, the Board approved the Trust's equality, diversity, and inclusion plan. The plan which was extensively co-produced with patients, staff, and external partners set out the actions that the Trust is going to take to be an anti-racist, and anti-discriminatory organisation for the benefit of colleagues and patients with a protected characteristic. The Trust Board also reaffirmed its commitment to the Board Pledge to demonstrate its commitment to a zero-tolerance approach to racism, incivility, and inappropriate behaviour in the workplace.

This report also provides an overview of progress made with the Trust's Equality, Diversity, and Inclusion objectives, the Gender Pay Gap reporting, and NHS mandated standards such as the Workforce Disability Equality Standard and Workforce Race Equality Standard.



Introduction

Walsall Healthcare NHS Trust provides local general hospital and community services to around 270,000 people in Walsall and the surrounding areas. We are the only provider of NHS acute care in Walsall, providing inpatients and outpatients at the Manor Hospital as well as a wide range of services in the community. Walsall Manor Hospital houses the full range of district general hospital services under one roof. Work on Walsall's multi-million pound Urgent and Emergency Care Centre is now entering the final six months of the project and is well on track for completion by the autumn of 2022.

The c 40 million pound development, being delivered by Tilbury Douglas Construction Limited, will significantly improve Walsall Healthcare NHS Trust's emergency care facilities and capacity. It includes an Urgent Treatment Centre (UTC); Emergency Department (ED) including Resus and Rapid Assessment and Treatment(RAT) area and Children's ED; co-located Paediatric Assessment Unit; Acute Medical Unit and provision for Ambulatory Emergency Care services in a future phase.

The Trust's Palliative Care Centre in Goscote is our base for a wide range of palliative care and end-of-life services. Our teams, in the Centre and in the community, provide high-quality medical, nursing, and therapy care for local people living with cancer and other serious illnesses, as well as offering support for their families and carers.

The Walsall Together Partnership continues to significantly transform the way local health and social care services are delivered to the local population in order to tackle the widening gaps in health inequalities by not only focusing on health but the wider determinants of health such as housing, education, and employment and the vital role that people and communities play in health and well-being.



Equality legislation and our legal duties

Equality Act 2010 & Public Sector Equality Duty 2011

What is the Public Sector Equality Duty (PSED)?

The equality duty was created by the Equality Act 2010 and replaced the race, disability, and gender equality duties. The duty came into force in April 2011 and covers the nine protected characteristics which are age, sex, disability, race, religion and belief, gender reassignment, sexual orientation, pregnancy and maternity, and marriage and civil partnership status. It applies in England, Scotland and Wales. The general duty is set out in section 149 of the Equality Act. These are sometimes referred to as the three aims or arms of the general duty. The three aims of the duty are set out below;

- **Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.**
- **Advance equality of opportunity between people who share a protected characteristic and those who do not.**
- **Foster good relations between people who share a protected characteristic and those who do not.**

The Act states that meeting different needs also involves taking steps to take account of disabled people's disabilities. It describes fostering good relations as tackling prejudice and promoting understanding between people from different groups. It states that compliance with the duty may involve treating people more favourably than others e.g. disabled people.

Equality legislation and our legal duties

There are two ways that a body can be subject to the general equality duty. Those bodies listed in schedule 19 of the Equality Act 2010 are subject to the general duty. In addition, any organisation which carries out a public function is subject to the general duty.

The general duty requires public authorities to have due regard to the need to eliminate discrimination; advance equality of opportunity, and foster good relations when making decisions and developing policies (i.e. in all their planning and decision making) In order to meet the legal duty, it is necessary for organisations to understand the potential effects of its activities on different groups of people.

Where these are not immediately apparent, it may be necessary to carry out some form of assessment or analysis to understand any potential negative impact on protected groups e.g. age, disability, religion and belief, sexual orientation, marriage, and civil partnership status, gender reassignment, race, sex, pregnancy, and maternity. Under s.149 in R (Brown) v. Secretary of State for Work and Pensions 2008 equality case law, the Brown principles have been accepted by courts in later cases. Those principles are;

- The equality duty is an integral and important part of the mechanisms for ensuring the fulfilment of the aims of anti-discrimination legislation.
- The duty is upon the decision-maker personally. What matters is what he or she knew.
- A body must assess the risk and extent of any adverse impact and ways in which such risk may be eliminated before the adoption of a proposed policy.

Governance of Equality, Diversity and Inclusion

Walsall Healthcare has governance structures in place to ensure that equality, diversity, and inclusion is monitored and reported to the Trust Board.

People and Organisation Development Committee-PODC

This group is chaired by a non-Executive Director and member of the Trust Board.

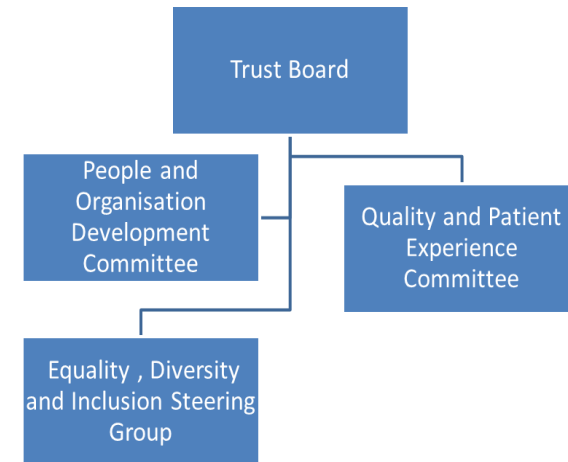
The purpose of the group is to provide strategic direction on all matters related to People and Organisation Development which includes equality and inclusion. Progress is reported to the Board on a regular basis.

Equality Diversity and Inclusion Steering Group- EDISG

This group has operational responsibility for ensuring the delivery of the Trust's Equality, Diversity, and Inclusion delivery plan and providing assurance that the Trust acts in accordance with its statutory duties under the Public Sector Equality Duty.

Quality and Patient Experience Committee- QPEC

This committee has been established to ensure the involvement of community groups and patient representatives in the design of services and to monitor patient experience and complaints.



Progress against our equality objectives – meeting the Public Sector Equality Duty.

The Trust has taken concerted efforts over the past two years to improve its approach to equality, diversity, and inclusion. The Trust published its equality, diversity, and inclusion delivery plan in July 2021 and a formal launch took place in July 2021 with visits to various teams and departments across the Trust to present the plan and our aims and ambitions for equality, diversity, and inclusion. The EDI plan has four equality objectives. These are listed below.

Objective 1

18.0% of colleagues from a Black Asian and Ethnic Minority background are in AFC pay grades 8a and above. Our objective is to increase this by 10% which would mirror our current overall ethnic minority workforce representation which is 28%.

Objective 2

To be an anti-racist and anti-discriminatory organisation by creating a healthy workplace culture and healthcare service which is fully inclusive for colleagues and patients with a disability, from an ethnic minority background, LGBTQ+ background, and all of the other remaining protected characteristics (age, sex, gender reassignment, marriage and civil partnership status and pregnancy and maternity status).

Objective 3

To embed equality analysis into service redesign, improvement programmes and governance structures to ensure equality, diversity and inclusion is at the heart of everything we do.

Objective 4

To have reached Anchor Employer status by collaborating with partners to form a system wider Anchor Employer Alliance by April 2022. This will be achieved by working with partners in the Borough and beyond to offer employment opportunities for disadvantaged communities



Progress against our equality objectives – meeting the Public Sector Equality Duty

The equality, diversity, and inclusion delivery plan contains nine key deliverables which are aligned to NHS England and NHS Improvement regional Workforce Race Equality and Inclusion strategy priorities for the midlands. The nine key deliverables set out the actions we are going to take to improve equality, diversity, and inclusion.

Equality Objectives

WHT Equality Objective 1- Increase BAME representation at senior levels by 10% by December 2023

To be an anti-racist, anti-discriminatory organisation by creating a workplace culture by creating a healthy workplace culture for the benefit of staff and patients with a protected characteristic.

To embed equality analysis into service redesign, improvement programmes, and governance structures to ensure equality, diversity, and inclusion are at the heart of everything we do.

To have reached Anchor Employer status by collaborating with partners to form a system-wide Anchor Employer Alliance by April 2022

The nine key deliverables

1. Leading with compassion and inclusion

2. Removing barriers to inclusive and compassionate health and wellbeing support

3. Removing barriers to help staff speak up

4. Tackling racism and other types of discrimination.

5. Eliminating racism and bias in disciplinary

6. Reward and celebration when good practice is identified

7. Building accountability

8. Eliminating racism and bias in recruitment and progression

9. A collaborative approach across systems



Progress against our equality objectives – meeting the Public Sector Equality Duty

Trust Board Pledge

The Trust Board reaffirmed its commitment to its Board pledge which was developed in 2018. The pledge sets out a zero-tolerance approach to incivility, racism, discrimination, bullying, harassment, and victimisation.

“We will demonstrate through our actions that we listen and support people. We will ensure the organisation treats people equally, fairly and inclusively, with zero tolerance of bullying. We uphold and role model the Trust values chosen by you”.



Progress against our equality objective (1) – meeting the Public Sector Equality Duty.

Progress against equality objective 1.

In relation to meeting the Workforce Race Equality Standard (WRES) Model Employer Targets set by NHSE/I, the Trust has made significant improvements in improving workforce representation of colleagues from a Black, Asian and Ethnic Minority background at a senior level (Band 8a and above). Representation has increased overall within the Trust over the past two years from 18.0% in 2020 to 25.54. % as of 31st March 2022.

The overall representation of colleagues employed by the Trust from a Black Asian and ethnic minority background has also improved over the past two years from 28.01% in 2020 to 32.0% as of 31st March 2022. This is currently higher than the ethnic minority population in Walsall which is approximately 23.1.% Walsall is a culturally diverse town where people of Indian, Pakistani, and Bangladeshi backgrounds form the largest minority ethnic groups.

The Trust will continue to improve its representation at senior levels and across the organisation by ensuring inclusive recruitment practices such as cultural ambassadors and a robust approach to talent management is fully embedded within the organisation.

Objective 1

18.0% of colleagues from a Black Asian and Ethnic Minority background are in AFC pay grades 8a and above. Our objective is to increase this by 10% which would mirror our current overall ethnic minority workforce representation which is 28%.



Progress against our equality objective (2) – meeting the Public Sector Equality Duty (Staff Equality Networks)

Progress against equality objective 2

The Trust has put in place several interventions and initiatives to create and foster a culture and climate of equality, diversity, and inclusion across the Trust.

The Trust established a Staff Inclusion Network oversight group and several staff networks. There is an LGBTQ+ Allies Network, a BAME Shared Decision Making Council which includes a BAME Support Group, and a Women and Allies Network. All of the staff networks are involved in shared governance and decision-making across the Trust and have contributed to policy development. They are an important resource in support of the Trust's main aim to create and foster a culture of climate and inclusion.

The staff network leads meet monthly and discuss matters related to equality, diversity, and inclusion and how they can support the delivery of equality across the organisation. Each of our staff networks has an Executive Sponsor and the network chairs meet regularly with their Executive Sponsors. Progress reports on activities of the network are regularly reported to the Equality, Diversity, and Inclusion Steering Group and the People and Organisation Development Committee a sub-committee of the Trust Board.

Objective 2

To be an anti-racist and anti-discriminatory organisation by creating a healthy workplace culture and healthcare service which is fully inclusive for colleagues and patients with a disability, from an ethnic minority background, LGBTQ+ background, and all of the other remaining protected characteristics (age, sex, gender reassignment, marriage and civil partnership status and pregnancy and maternity status).



Staff **INCLUSION** Network
Women and Allies
Network Lead



Walsall Healthcare 
Staff **INCLUSION** Network



Staff **INCLUSION** Network
LGBTQ+ Lead



Progress against our equality objective (2) – meeting the Public Sector Equality Duty.

- The BAME Shared Council launched in September 2020 -Shared decision-making is a model of leadership which places staff at the heart of the decision-making process.
- They have raised the profile of BAME Shared Council in the Trust Daily Dose and Chief executive updates.
- They have promoted Black History Month as part of the BAME Council launch.
- They have participated in Cultural Ambassador training delivered by the Royal College of Nursing to challenge and address cultural bias and discriminatory practices in recruitment and selection and Employee Relations.
- The Council set up a staff network forum for colleagues to share experiences and issues affecting their work, health and well-being, career progression, and professional development.
- They have developed promotional videos to encourage BAME colleagues to take the COVID 19 Vaccine
- They supported the EDI lead to host career and leadership development workshops targeted at Black, Asian and Ethnic Minority colleagues and colleagues with a disability.

Objective 2

To be an anti-racist and anti-discriminatory organisation by creating a healthy workplace culture and healthcare service which is fully inclusive for colleagues and patients with a disability, from an ethnic minority background, LGBTQ+ background, and all of the other remaining protected characteristics (age, sex, gender reassignment, marriage and civil partnership status and pregnancy and maternity status).



Progress against our equality objective (2)– meeting the Public Sector Equality Duty.

- The BAME Shared Council promotional work during the peak of the COVID-19 pandemic resulted in a significant increase in vaccine uptake amongst BAME Colleagues. 78% of BAME colleagues received the vaccine up from 45% in early 2021.
- The BAME Shared Council was involved in the recent internal **Zero Tolerance to Racism** campaign in support of the Race Code Action Plan.
- The BAME Shared Council were awarded a **highly commended** award for their work to increase vaccine uptake amongst BAME colleagues at the ICS Regional Black History Month Awards Ceremony in October 2021.
- The BAME Shared Council was also awarded an internal staff award– **The diversity and inclusion category award**.
- The BAME Shared Council with support from the EDI lead and Well Wishers Charity set up an overseas Nurses and Buddies Scheme to provide an additional support mechanism for over 200 newly arrived nurses in the UK.

Objective 2

To be an anti-racist and anti-discriminatory organisation by creating a healthy workplace culture and healthcare service which is fully inclusive for colleagues and patients with a disability ,from an ethnic minority background, LGBTQ+ background, and all of the other remaining protected characteristics (age, sex, gender reassignment, marriage and civil partnership status and pregnancy and maternity status).



Progress against our equality objective (2) – meeting the Public Sector Equality Duty

The LGBTQ+ and Allies Network was established in late 2020 and to date has carried out the following activities;

- The network launched a successful LGBTQ + History Month in February 2021.
- They distributed Rainbow Badges to 150 colleagues with pledges made by colleagues to support LGBTQ+ equality across the Trust.
- They hosted an LGBTQ+ webinar in partnership with the Birmingham LGBT Centre.
- The network played a key role in the installation of Pride Flags installed outside the hospital (main and rear entrances).
- They participated in the national NHSE/I Pride week.
- They hosted a celebration of PRIDE week in the Main Atrium where additional rainbow badges were given out and a further 75 pledges to advance LGBTQ+ equality were made by colleagues across the Trust.
- They increased network membership from 2 people to 20 members.
- The LGBTQ+ Allies Network are members of a regional planning committee for Birmingham Pride.

Objective 2

To be an anti-racist and anti-discriminatory organisation by creating a healthy workplace culture and healthcare service which is fully inclusive for colleagues and patients with a disability, from an ethnic minority background, LGBTQ+ background, and all of the other remaining protected characteristics (age, sex, gender reassignment, marriage and civil partnership status and pregnancy and maternity status).



Staff **INCLUSION** Network
LGBTQ+ Lead



Progress against our equality objective (2) – meeting the Public Sector Equality Duty

- They have offered support and guidance with policy development (LGBTQ+ Trans Policy and Guidance)
- They have developed articles for the daily dose, promoting LGBTQ+ events and celebration days.
- They have been involved in planning meetings for the Rainbow Badge Phase 2 Initiative (audit of LGBTQ+ inclusivity at the Trust)
- They have participated in Lunch and Learn Sessions for LGBTQ+ equality
- They have developed an online teams channel for the Network to increase engagement and visibility of the LGBTQ+ workplan.

Objective 2

To be an anti-racist and anti-discriminatory organisation by creating a healthy workplace culture and healthcare service which is fully inclusive for colleagues and patients with a disability, from an ethnic minority background, LGBTQ+ background, and all of the other remaining protected characteristics (age, sex, gender reassignment, marriage and civil partnership status and pregnancy and maternity status).



Staff **INCLUSION** Network
LGBTQ+ Lead



Progress against our equality objective (2) – meeting the Public Sector Equality Duty

The network was established in October 2021 and identified three immediate priorities to work on which are as follows:

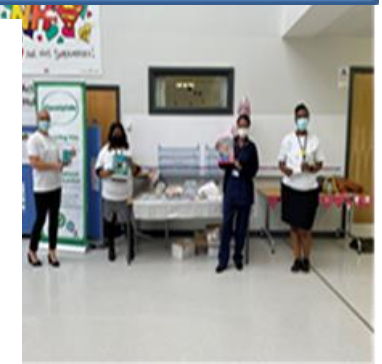
- **Menopause** – develop a policy, and increase awareness and knowledge amongst line managers. (Develop a support package for colleagues)
- **Career progression** – support available, how to access progression.
- **Mental Health** – Support available.
- The network has increased its membership which now has approx. 80 members.
- They have created a Menopause Champion Team who are currently working on a Menopause policy for the trust.
- They have made links with Walsall College to gain access to free courses available to staff.
- They have established an online platform for the network to increase engagement and visibility of the network activities amongst its members.

Objective 2

To be an anti-racist and anti-discriminatory organisation by creating a healthy workplace culture and healthcare service which is fully inclusive for colleagues and patients with a disability, from an ethnic minority background, LGBTQ+ background, and all of the other remaining protected characteristics (age, sex, gender reassignment, marriage and civil partnership status and pregnancy and maternity status).



Staff **INCLUSION** Network
Women and Allies
Network Lead



Progress against our equality objective (2)– meeting the Public Sector Equality Duty

- The network leads have recently met with Dr Omi Ohizua – Obs & Gynae Consultant to look at the support available to staff with Peri-Menopause/Menopause when colleagues experience any challenges with their GP.
- They have secured engagement from the Executive sponsor and Non-executive sponsor.
- They have hosted numerous guest speakers at network meetings: Mental Health, Domestic Violence, RCN & Health & Wellbeing.
- The network promoted International Women's Day and hosted a webinar for all staff.
- They have addressed flexible/agile working issues.
- They have developed a survey for members of the Network to understand preferred meeting dates and times and to understand topics they would like to discuss at future meetings.
- They are currently involved in joint collaboration work with RWT (e.g. Equality and Human Rights Week and other EDI related initiatives).

Objective 2

To be an anti-racist and anti-discriminatory organisation by creating a healthy workplace culture and healthcare service which is fully inclusive for colleagues and patients with a disability ,from an ethnic minority background, LGBTQ+ background, and all of the other remaining protected characteristics (age, sex, gender reassignment, marriage and civil partnership status and pregnancy and maternity status).



Staff **INCLUSION** Network
Women and Allies
Network Lead



Progress against our equality objective (2)– meeting the Public Sector Equality Duty

The Trust has proactively promoted equality, diversity, and inclusion across the organisation with a number of celebration days, blogs, articles, events, and Lunch and Learn sessions to raise awareness about our legal responsibilities to promote equality, diversity, and inclusion as a Public Sector organisation. These are as follows;

- Promotion of religious festivals such as EID and Vaisakhi
- Pride Month
- LGBT History Month
- National Inclusion Week
- International Women's day
- International Day of Disabled Persons
- Equality and Human Rights Week
- Race Equality Week
- Business Disability Forum attendance at Divisional Quality Boards
- Black Lives Matter Podcasts – Welcome to RAS (Race and Space)
- Black History Month & celebration awards ceremony
- Training on how to be an effective ally

Objective 2

To be an anti-racist and anti-discriminatory organisation by creating a healthy workplace culture and healthcare service which is fully inclusive for colleagues and patients with a disability, from an ethnic minority background, LGBTQ+ background, and all of the other remaining protected characteristics (age, sex, gender reassignment, marriage and civil partnership status and pregnancy and maternity status).



Progress against our equality objective (2)– meeting the Public Sector Equality Duty

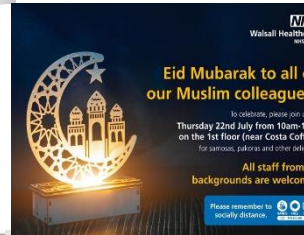
The LGBTQ+ and Allies Network hosted a successful LGBTQ+ Pride week in September and secured 75 additional pledges from colleagues across the Trust in support of LGBTQ+ Equality.

A regional webinar entitled Educate our Prejudice was hosted by the LGBTQ+ Network and was attended by 40 people from various NHS Trusts.

Several Lunch and Learn sessions were hosted by our staff network leads as part of National Inclusion Week. Our network leads presented information to colleagues on different topics related to equality, diversity, and inclusion.

To raise awareness about EID our network leads hosted an event in the main atrium alongside members of The Trust's chaplaincy team to promote the importance of EID and its significance.

The Race /Religion and belief Network developed guidance for Ramadan and developed articles and blogs for the daily dose.



Progress against our equality objective (2) meeting the Public Sector Equality Duty

The BAME Shared Council hosted a successful race equality week event in collaboration with RWT employee voice groups. The event was attended by Marcus Riddell – Director at NHS Professionals and Anton Emanuel-Head of WRES at NHSE/I.

The Women and Allies Network hosted a successful International Women's Day webinar to celebrate the role of women in the NHS and was attended by internal and external guest speakers.

To promote and celebrate the International Day of Disabled persons the Trust hosted an internal event with a special guest speaker Tully Kearney- Paralympic Champion.

As part of Equality and Human Rights week, several fact sheets providing detailed information about each of the nine protected groups were produced and communicated across the Trust to highlight the importance of the week, and a number of lunch and learn sessions were hosted by our staff networks. For Equality and Human Rights week in May 2022, a joint celebration event for national staff networks day was held in partnership with the Royal Wolverhampton Trust.



Progress against our equality objective (2) – meeting the Public Sector Equality Duty

As part of the Trust's commitment to race equality, a number of initiatives to raise awareness about the importance of race equality in the workplace as part of the work of the ICS Black Lives Matter Delivery Group were promoted across the organisation such as;

The A-Z of the Black Lives Matter podcasts series

- Who is B.A.M.E?
- White Allyship
- White Privilege
- Microaggressions and gaslighting
- How to be an effective ally (Race)

These podcasts entitled **Welcome to RAS** (Race and Space) were recorded for colleagues that were unable to attend and shared internally through the Trust Communication channels. As a result of this work, five resource packs have been produced entitled-

The A-Z Glossary of terms, understanding racism, microaggressions and gaslighting, white privilege, and white allyship will be made available to all staff for use across the Trust.

The Effective Ally training was delivered to HR teams at Walsall Healthcare and the Royal Wolverhampton NHS Trust.



Progress against our equality objective (2)– meeting the Public Sector Equality Duty

In October as part of Black History Month celebrations, the Trust hosted a series of events to promote and highlight the importance and significance of Black History Month. An internal communications campaign entitled (Proud to be) to promote Black History Month highlighting Black African, and Black Caribbean colleagues that work at the Trust was also promoted each day throughout October.

The Trust worked with the five NHS Trusts in the region to host a regional Black History Month awards and celebration event in recognition of the disproportionate impact of COVID-19 on colleagues from a Black African and Black Caribbean background. The event was attended by over 130 staff across the Black Country and was hosted by Yvonne Coghill OBE/MBE. Neil Flanagan (World War 2 Hero) gave a short speech at the event. A front line doctor from Walsall Healthcare received an award for the frontline hero of the year and the Director of Midwifery and BAME Shared Council received a highly commended award for their efforts during the pandemic.



Progress against our equality objective (2)– meeting the Public Sector Equality Duty

Zero Tolerance approach against racism, incivility, and discrimination campaign.

The Trust recently launched a joint zero tolerance to racism campaign working in partnership with the Royal Wolverhampton NHS Trust. This campaign is one of several actions in the Trust's Race Code Action Plan

The BAME Shared Council Chair was featured in the posters which set out the Trust's zero-tolerance approach to racism and incivility.

A guide was produced which set out what staff should do if they witness bullying, harassment, and discrimination on the grounds of race. This guidance has been published on the external internet.

The posters were distributed to all managers and service leads across key areas of the Trust along with a letter from the Director of People and Culture to explain the Trust's approach to tackling racism and incivility on the grounds of Race.

Articles from the Chief Executive, the Director of People and Culture, and a blog from the BAME Shared Council was communicated in the daily dose and in a Trust-wide email to all staff.



Progress against our equality objective (2) – meeting the Public Sector Equality Duty

Other initiatives to promote equality, diversity, and inclusion

- An EDI and EIA e-learning modules were developed and incorporated into the Managers Framework and made available to all managers across the Trust.
- In February 2021, Walsall Healthcare became an official partner of the Rainbow Badge Scheme, and a launch took place with over 150 people signing up for a rainbow badge.
- The Trust was one of forty NHS Trusts to be selected to participate in the Rainbow Badge Scheme phase 2 – a free assessment to understand the Trust's approach to LGBTQ+ inclusivity in service delivery and in the workplace.
- Walsall Healthcare was one of the first NHS Trusts to sign up for the Race Code and was successfully awarded the Governance forum's Race Code accreditation and kitemark. The Race Code sets out the Trust's commitment to being an anti-racist organisation and improving representation at senior levels and is a governance framework for Board and senior leader effectiveness.
- The Trust became a member of the Business Disability Forum and was awarded the Mindful Employer Charter Mark in recognition of the work undertaken to support colleagues with mental ill-health in the workplace.



Progress against our equality objective (2)– meeting the Public Sector Equality Duty

- As part of the Trust's ongoing commitment to improving its approach to inclusive recruitment and selection, the Trust implemented the Royal College of Nursing's Cultural Ambassador programme and trained 47 Cultural Ambassadors to participate in interview panels at band 6 and above.
- An inclusive recruitment and selection training package has been developed and delivered across the organisation to over 200 managers.
- An inclusive recruitment guide has also been produced and has been distributed to managers that have attended the training.
- A positive action leadership programme REACH higher has been developed specifically for colleagues with a disability and colleagues from a Black, Asian, and Ethnic Minority background (AFC pay grades 5-7). The aim of the programme is to support the career aspirations of under represented groups.
- The Trust was successful in being selected to participate in the NHS Leadership Academy's reciprocal Mentoring Scheme for Inclusion. The programme is due to start in the summer of 2022.
- The Trust has recently trained nine colleagues in Gallup's Strength Coaching. The training will equip colleagues to provide career coaching to under represented groups.

RECIPROCAL
MENTORING
FOR INCLUSION
PROGRAMME

REACH
HIGHER
Positive Action Leadership Programme for
colleagues from under-represented groups

CliftonStrengths[®]




Progress against our equality objective (3) – meeting the Public Sector Equality Duty

Demonstrating due regard

- The Trust has developed an EIA framework and associated policy and an EIA e-learning to support improvements in the quality of equality impact assessments that are being completed across the Trust.
- Equality Impact Assessments are currently completed at the Policy development stage and authors of Board and committee reports are required to complete the front cover sheet in order to provide details of any equality, diversity, and inclusion implications in relation to the report.
- An EIA prompt sheet has also been developed which provides examples of equality diversity and inclusion considerations to support improvements in the quality of EIA being completed.
- Further work to improve the quality of EIA will take place in the form of EIA training for service leads, managers, and authors of Board reports later on in the year.
- An EIA training video for Board members is currently in development to provide further information on due regard and the Brown principles.
- Further work will also be carried out to increase uptake of the EIA e-learning module once the new LMS has been implemented across the Trust.

Objective 3

To embed equality analysis into service redesign, improvement programmes and governance structures to ensure equality, diversity and inclusion is at the heart of everything we do.



Acas managers' guide to equality impact assessments

acas



Progress against our equality objective (4) – meeting the Public Sector Equality Duty

Good progress has been made with the development of an anchor alliance across the Black Country ICS and developing a system-wide anchor institution approach.

Partnership arrangements are in place for bulk recruitment with the Walsall Housing Group which has resulted in a successful recruitment campaign into entry levels roles.

A delivery plan for the Anchor Employer Alliance has also been developed and actions are currently being implemented by the Project Lead for the ICS Anchor Employer Alliance (Growing for the future workstream).

Objective 4

To have reached Anchor Employer status by collaborating with partners to form a system wider Anchor Employer Alliance by April 2022. This will be achieved by working with partners in the Borough and beyond to offer employment opportunities for disadvantaged communities

What makes the NHS an anchor institution?

NHS organisations are rooted in their communities. Through its size and scale, the NHS can positively contribute to local areas in many ways beyond providing health care. The NHS can make a difference to local people by:



As an anchor institution, the NHS influences the health and wellbeing of communities directly by being there. But by choosing to invest in and work with others locally and responsibly, the NHS can have an even greater impact on the wider forces that make us healthy.

NHS Equality, Diversity and Inclusion Mandated Standards

Workforce Race Equality Standard (WRES)

Since its introduction in 2015, the WRES has required NHS trusts to self-assess, annually, on the nine indicators of workforce race equality; these include indicators related to BME representation at senior and board level.

The national WRES team provides direction and tailored support to NHS trusts, and increasingly to the wider healthcare system, enabling local NHS and national healthcare organisations to:

- Identify the gap in treatment and experience between white and BME staff;
- Make comparisons with similar organisations on the level of progress over time
- Take remedial action on causes of ethnic disparities in WRES indicator outcomes

The main purpose of the WRES is to help local, and national, NHS organisations review their data against the nine WRES indicators, produce an action plan to close the gaps in workplace experience between White and Black and Ethnic Minority (BME) staff, and improve BME representation at the Board level of the organisation.

Since the introduction of the WRES, the Trust has reported on the nine workforce indicators and has published this data on the external facing website. A combined WRES/Race Code action plan has been developed and is currently being implemented. Details of progress with the WRES can be found in ANNEX A of this report.



NHS Equality, Diversity and Inclusion Mandated Standards

Workforce Disability Equality Standard (WDES)

The WDES is a set of ten specific metrics that will enable NHS organisations to compare the experiences of disabled and non-disabled staff. There is a requirement to use the information to develop a local action plan and demonstrate progress against the indicators of disability equality.

The WDES is mandated through the NHS Standard Contract. There are 10 WDES metrics, which cover areas such as Board representation, recruitment, bullying, and harassment. The Trust reported on the WDES for the first time in 2020 and has published data related to the WDES on its external website. Details of our progress with the WDES is in ANNEX A.

Accessible Information Standard (AIS)

The Accessible Information Standard (AIS) aims to make sure that people who have a disability, impairment, or sensory loss get information that they can access and understand, and any communication support that they need from health and care services. There are plans to incorporate the e-learning for the Health AIS module into the Trust's new LMS system for all patient-facing colleagues to access by the Summer of 2022. The Trust has improved its approach to capturing patient demographic data across the protected groups and has developed a flag system in the Medway Electronic Patient records system to record and flag Patients with different communication needs and other patient demographic information.



NHS Equality, Diversity and Inclusion Mandated Standards

Equality Delivery System2

The main purpose of the EDS2 is to help local NHS organisations in discussion with local partners and people, review and improve their equality and diversity performance for people protected under the Equality Act 2010.

It is also a useful tool to support progress with workforce equality and diversity and inclusion. In 2019, the Trust published the outcome of the EDS2 self-assessment exercise working with local partners and key stakeholders to assess its equality, diversity, and inclusion performance. The assessment highlighted a number of identified areas for improvement. During the 20/21 year, the EDS2 reporting was put on hold due to the global pandemic.



A revised version of the EDS2 has been recently developed by the Equality and Diversity Council and will be formally launched later this year. Once the revised framework has been launched, Walsall Healthcare will carry out a self-assessment exercise involving key partners and work is underway to identify key services that will undertake this assessment.

Gender Pay Gap reporting

Gender Pay Gap reporting legislation requires employers with 250 or more employees to publish statutory calculations, every year showing how large the pay gap is between their male and female employees.

The specific requirements of the Equality Act 2010 Act (Gender Pay Gap Regulations) 2017 are to publish information for the specific measures these are as follows;

- ☐ Average gender pay gap as a mean
- ☐ Average gender pay gap as a median
- ☐ Average bonus gender pay gap as a median
- ☐ The proportion of men and women receiving a bonus payment
- ☐ The proportion of men and women in each quartile pay band

The mean is the overall average hourly wage across the whole Trust and is influenced by extremes in high or low hourly rates of pay.

The Trust submits Gender Pay Gap reporting information annually via the Government Portal and regularly publishes this information on the external facing website. Further details of the Trust's Gender Pay Gap data can be located in ANNEX A of this report.



Patient Experience & Equality monitoring

The Trust continues to listen and act upon the views of its patients, relatives, and carers with protected characteristics. The introduction of the programme of the Patient, Carer, and Staff Experience Stories to Trust Board allows patients with a protected group and staff to attend the Trust Board to give accounts of their experience of care. This has been extended to QPEC, Clinician forums, and frontline teams.

The Chaplaincy team also introduced an encounter form to capture the type and frequency of support provided. The SPaRC (Spiritual, Pastoral and Religious Care) form was introduced alongside faith profiles and was initiated following a patient story regarding access to chaplaincy, particularly from the Sikh faith. Vacant posts were also recruited.

Patient Involvement Partners

The Patient Partner programme was introduced in 2021 and continues to evolve. Workstreams, where partners have expressed interest in involvement, include the End of Life Steering Group, the AMU Improvement plan, the Oncology Nurse Specialist out-of-hours survey, and the Patient Experience Group. The Patient partners are broadly representative of the nine protected groups.



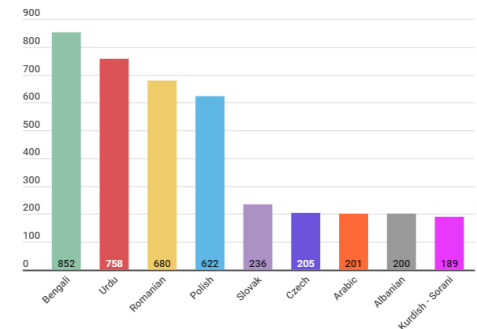
Patient Experience & Equality monitoring

Patient partners have been involved in the development and co-design of new ward Information Boards to be completed in 2022. A **patient partner** was actively involved in a faith-based improvement arising from a poor patient experience. This resulted in the purchase and distribution of 30 hand-held, pocket-sized devices with pre-enabled microchips that are programmed to play a range of Sikh prayers and hymns. They assist with daily worship at a time when patients are unable to visit their normal place of worship and might find it difficult to attend the Trust Chaplaincy Sacred Spaces, or when visiting is restricted.

Interpreting and Translation

Our usage of the interpreting and translation services provided by Word 360 has increased. In 2021/2022, 8432 bookings were confirmed, which is an increase of 2226 in comparison to 2020/2021 (6206). When comparing the total number of bookings (including cancellations), 50.6% of bookings were for telephone interpreters, with 48.9% being face-to-face bookings and 0.6% taking place via video. The number of video bookings is expected to increase with the introduction of the updated Wordskii app, which is expected by June 2022.

**Most commonly used languages
Interpretation and Translation
service**



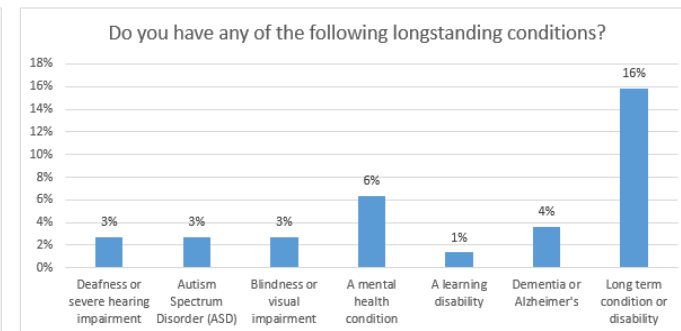
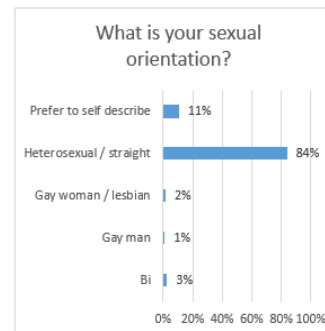
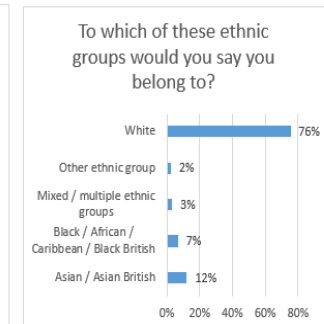
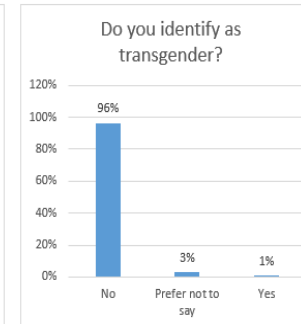
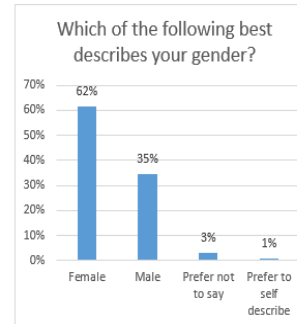
Patient Experience & Equality monitoring (complaints 2021-22)

Patient Experience & Equality monitoring

Patient experience feedback methods, including FFT and Mystery patients, collect optional demographic information. The charts illustrate equality monitoring from those opting to participate.

An equality monitoring form is in place and is issued at the point of acknowledgment of a written complaint with 6% (22) returned in 2021/2022.

All complaints across the protected groups are followed up and analysed to identify any areas for improvement and feed into the Trust training needs analysis where appropriate.



Patient Experience & Equality monitoring (complaints 2021-22)

Ethnicity:

50% of respondents identified themselves as White British, 13.6% Bangladeshi, 9% Caribbean, 9% Irish, 4.5% African, 4.5% Pakistani, 4.5% Other Mixed 4.5% White and Black African

Age:

41% were aged 25-49, 22.7% 18-24, 18.1% 50 to 64, 9% 65-74, 4.5% 75-84 and 4.5% 85 years or over.

Religion or belief:

40.9% Christianity, 36.3% no-religion, 9% Islam, 9% prefer not to say and 4.5% Buddhism

Sexual Orientation:

77.2% Heterosexual, 9% Homosexual/Gay Woman, 4.5% Bisexual, 4.5% Prefer to self-describe, 4.5% Prefer not to say.

Gender:

Male 54.5%, Female 36.3%, 9% prefer not to say.

Gender re-assignment

95.4% No, 4.5% prefer not to say

Relationship status

36.3% Married, 18.18% Single, 18.18% Living with partner, 13.6% Widowed, 9% Divorced and 4.5% Separated.

Pregnancy:

95.4% were not pregnant at the time of making a complaint, 4.5% were.

Disability /Long term health condition

95.4% of patients do not consider themselves to have a longstanding condition, 18.1% of patients do and 13.6% prefer not to say.

Looking ahead – 2023/2024: Key areas of focus

To continuously improve our approach to equality, diversity, and inclusion, the following areas have been identified as key areas of focus over the forthcoming year.

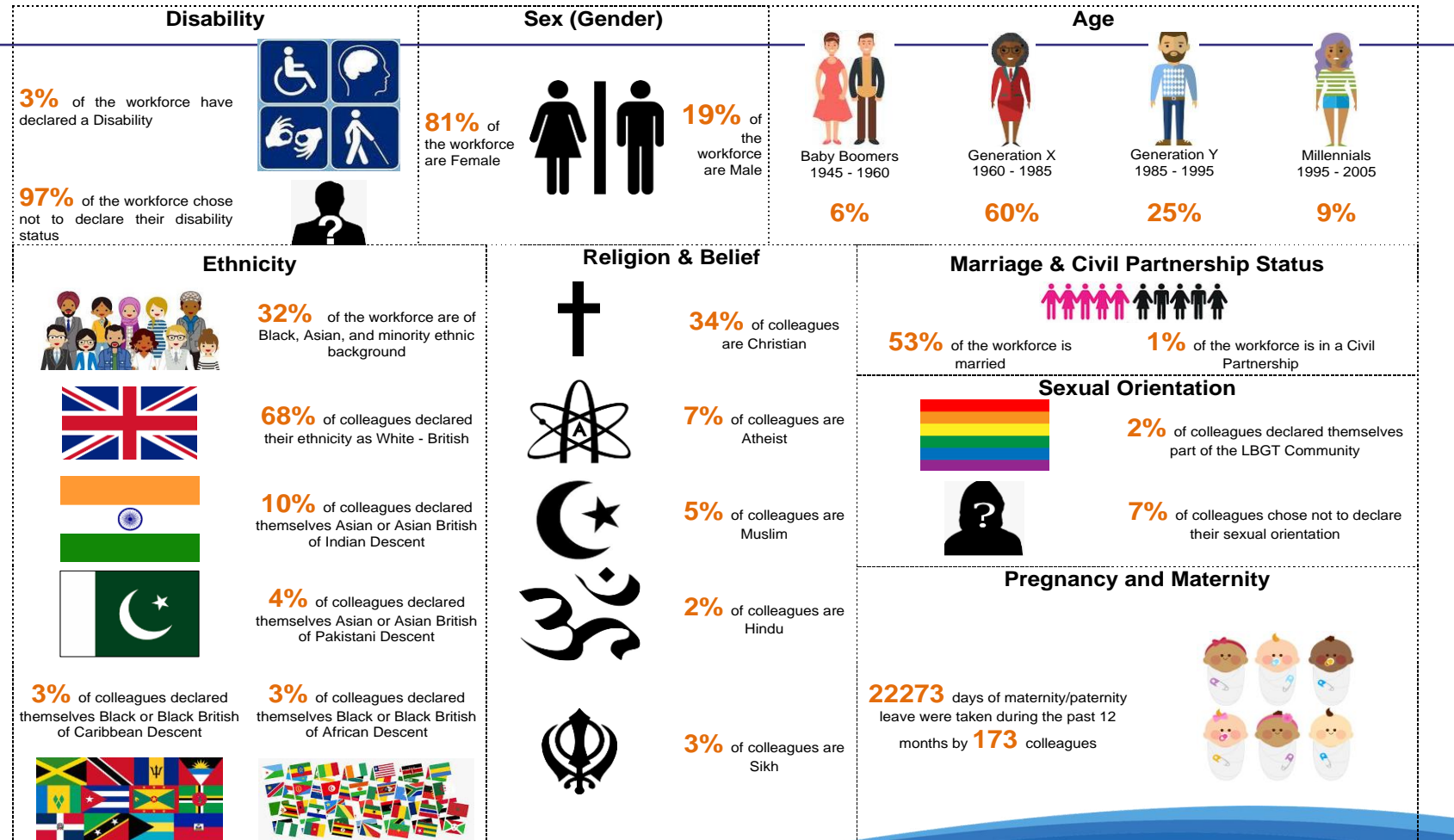
- Improve the Trust's position and overall approach in relation to the promotion of disability equality across the Trust by undertaking the Business Disability Forum's Disability SMART Assessment.
- Implement the findings and recommendations from the LGBT Foundation's Rainbow Badge Scheme (phase 2).
- Improve the quality of Equality Impact Assessments that are completed by offering the option of face-to-face EIA training for service leads and authors of board and committee reports.
- Ensure at least 85% of colleagues with patient-facing roles access and undertake the Accessible Information Standard module on the new LMS once implemented.
- Increase the uptake of managers accessing and undertaking the EDI and EIA modules via the Managers Framework.
- Implement and embed the NHSE/I six high-impact recruitment actions.
- Ensure at least 25 people are trained to deliver Cultural Competency training delivered by an external provider. Deliver at least 5 sessions a year to colleagues in patient-facing roles.
- Undertake an EDS2 assessment of key services across the Trust
- Deliver the key priority areas within the ICS EDI Strategy
- Increased focus on improving the WRES /WDES staff survey cultural indicators (reducing incidences of bullying, harassment and abuse and discrimination)



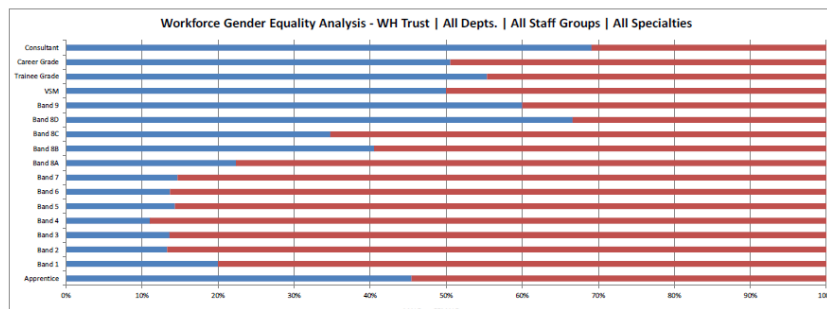
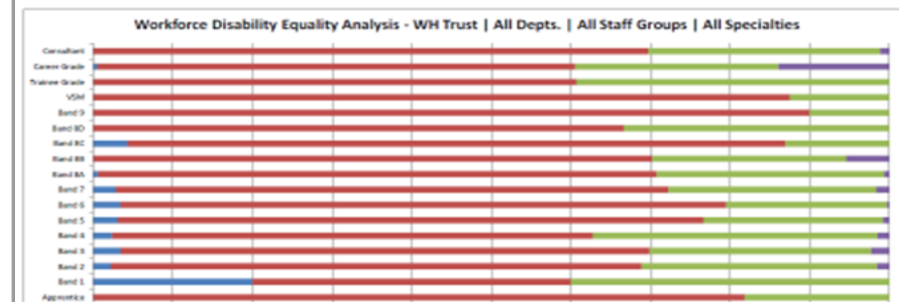
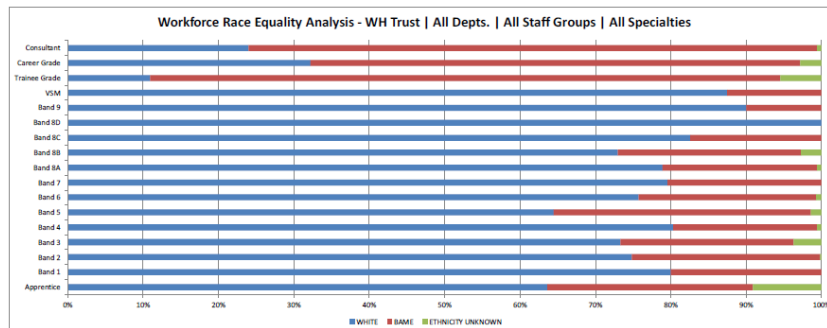
ANNEX A: WORKFORCE EQUALITY DIVERSITY AND INCLUSION INFORMATION



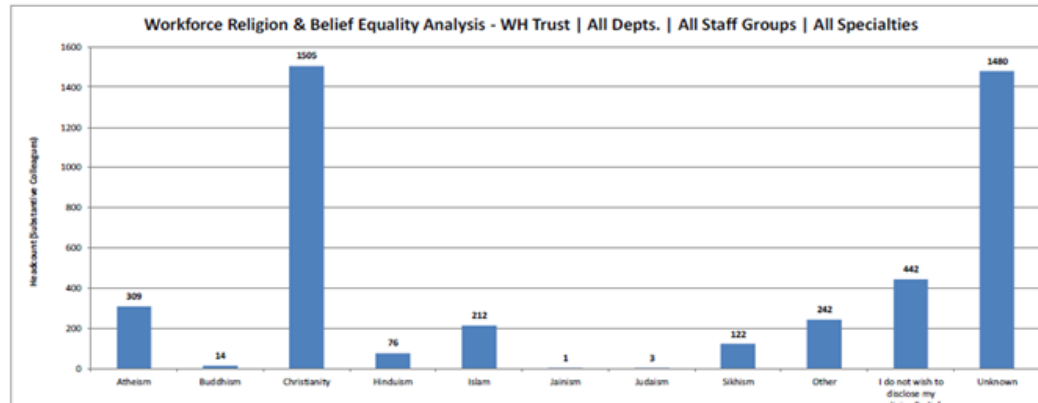
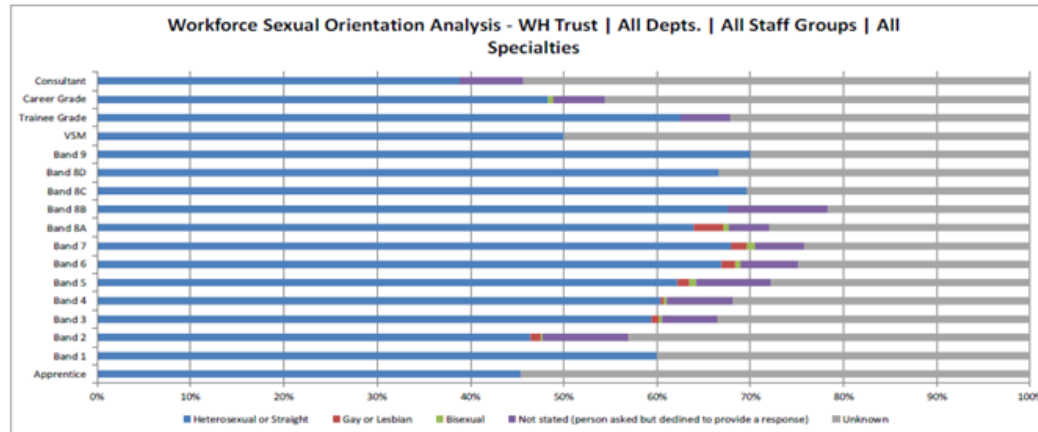
EDI Workforce Demographics (Trust Overall) – April 2022 (produced by the Workforce Intelligence Team)



EDI Workforce Demographics (Trust Overall) – April 2022 (produced by the Workforce Intelligence Team)



EDI Workforce Demographics (Trust Overall) – April 2022 (produced by the Workforce Intelligence Team)



WRES Summary 21-22

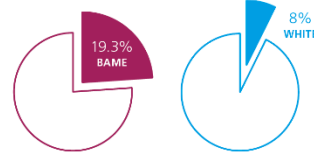
32.5%



The percentage of **BAME** staff in each of the AfC Bands 1-9 or Medical and Dental subgroups and VSM (including executive Board members) compared with the percentage of **BAME** staff in the overall workforce.



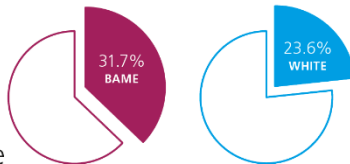
The percentage of staff that personally experienced discrimination at work from their manager/ team leader or other colleagues.



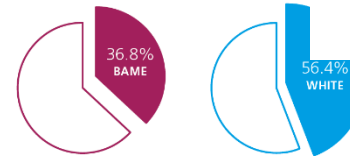
BAME staff are
0.12 times LESS

likely to enter the formal disciplinary process (as measured by entry into a formal disciplinary investigation) when compared with their white counterparts.

The percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months.



The percentage believing that trust provides equal opportunities for career progression or promotion.



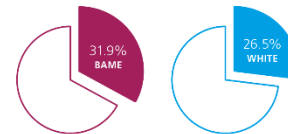
White staff are
0.91 times MORE
likely to access non mandatory training and CPD when compared to their **BAME** counterparts.



White staff are
1.4 times MORE
likely to be appointed from shortlisting across all posts.



The percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in the last 12 months.



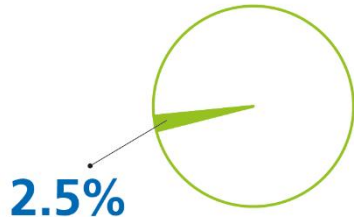
-11.8%

The percentage difference between the organisations' Board voting membership and its overall workforce.

Infographics produced by The Communications Team at Walsall Healthcare and The Royal Wolverhampton Trust



WDES SUMMARY 21-22



Percentage of disabled staff in AFC pay bands or medical and dental subgroups and Very Senior Managers) including Executive Board members compared with the percentage of staff in overall workforce

-2%

The percentage difference between the organisation's Board voting membership and its organisation's overall workforce, disaggregated:

- By voting membership of the Board
- By Executive membership of the Board



Non disabled staff are

1.14 times MORE

likely to be appointed from shortlisting compared to disabled staff.

Infographics produced by The Communications Team at Walsall Healthcare and The Royal Wolverhampton Trust

	Disabled staff	Non-disabled staff
<p>The percentage of Disabled staff compared to non-disabled staff experiencing harassment, bullying or abuse from:</p> <ol style="list-style-type: none"> Patients/Service users, their relatives or other members of the public Managers Other colleagues 	<ol style="list-style-type: none"> 38.7% 21.4% 29.4% 	<ol style="list-style-type: none"> 26.4% 12.2% 20.8%
<p>Percentage of Disabled staff compared to non-disabled staff saying that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it.</p>	50.8%	48.8%
<p>The percentage of Disabled staff compared to non-disabled staff believing that the Trust provides equal opportunities for career progression or promotion.</p>	48.6%	52%
<p>The percentage of Disabled staff compared to non-disabled staff saying that they have felt pressure from their manager to come to work, despite not feeling well enough to perform their duties.</p>	32%	21.9%
<p>The percentage of Disabled staff compared to non-disabled staff saying that they are satisfied with the extent to which their organisation values their work.</p>	30.6%	31.4%
<p>The percentage of Disabled staff saying that their employer has made adequate adjustment(s) to enable them to carry out their work.</p>	65.3%	
<p>The staff engagement score for Disabled staff, compared to non-disabled.</p>	6.2	6.7



Gender Pay Gap Summary

2020					2021								
Gender	Average of Hourly Rate				Gender	Average of Hourly Rate		Comparison					
Male	£21.60				Male	£22.34		£0.74					
Female	£14.72				Female	£15.32		£0.60					
Difference	£6.88				Difference	£7.02		£0.14					
Pay Gap %	31%				Pay Gap %	31%		No Change					
2020					2021								
Gender	Median Hourly Wage				Gender	Median Hourly Wage		Comparison					
Male	£15.55				Male	£16.04		£0.49					
Female	£12.38				Female	£13.79		£1.41					
Difference	£3.17				Difference	£2.25		£0.92					
Pay Gap %	20%				Pay Gap %	14%		-6%					
2020					2021								
Quartile	Female	Female %	Male	Male %	Quartile	Female	Female %	Male	Male %	Comparison Count Female	Comparison % Female	Comparison % Male	Comparison % Male
Lower (1st)	889	84.03%	169	15.97%	Lower (1st)	932	85.74%	155	14.26%	43	1.71%	-14	-1.71%
Lower Middle (2nd)	930	87.90%	128	12.10%	Lower Middle (2nd)	939	86.31%	149	13.69%	9	-1.60%	21	1.60%
Upper Middle (3rd)	894	84.50%	164	15.50%	Upper Middle (3rd)	918	84.45%	169	15.55%	24	-0.05%	5	0.05%
Upper (4th)	739	69.78%	320	30.22%	Upper (4th)	754	69.30%	334	30.70%	15	-0.48%	14	0.48%