

# Notes of Equality and Diversity Committee meeting

Tuesday 30 September 2014, Vassalls, Level 3, Gate 38, Brunel

	Present	Robert Baker, Chair Ken Guy Nick Stibbs Jenny Symonds  Maria Smith – Note taker	Lesley Mansell Dayley Lawrence Jayne Stone	Christine Smith Dave Collins Christine Falco
1	Apologies received	Stephen Oram, Diane Cornish, Linda Hicken, Simon Wood, Juliet Winter, Harry Hayer, Mooi Tay, Pam Ward, Peter Russell		
2	Welcome	RB welcomed all to today's meeting, this being the third for this year and an introduction was made around the table.		
3	Minutes & Actions from last meeting	RB asked for an update on the previous Action List (July 2014) and to clear those that have been completed.  The Minutes for 23 July 2014 were agreed and recorded as accurate.  (An updated Action list is at the end of these minutes)		
4	Matters Arising	4a	Bus shelter Brunel  Bus shelter at Brunel will be installed by the revolving door. Completion date for this is September 2015 (under Phase 2 of the new build).	
		4b	E&D Committee reporting – Eric Sanders, Trust Secretary, to comment  RB said that we need 4 priorities aligned with this group. Need to ensure that by the next meeting these 4 priorities are linked with quality requirements and other alignments. Need to pick up themes in other meetings. KG agreed and also Eric Sanders was realigning meeting structures. KG asked who and when this will be done as H Hayer is now chair of this committee. Equality work will be aligned to workforce priorities with LM/HH. Eric Sanders is putting a paper to the Board on compliance. The Workforce meeting will now be every month to gain pace on the priorities. Initial draft by end of October.	
		4c	Equality notice boards in Brunel  LM spoke to Ruth Sidgwick re: noticeboards outside restaurant. Contacted Carillion to carry out, costing to be decided. DL said when outcome of price is known, DL's office might be able to help out with funding. LM thanked DL for this offer.	

		<p>4d 12 hour shifts – EIA</p> <p>LM has chased this, original work was done by Heather Burden who has since left the Trust, and then this went to Louise Smith. LM hasn't received the final EIA re: 12 hour shift. RB said it was important that this is being done. Need to be seen as fit for purpose and adding value.</p> <p>4e Harassment &amp; Bullying report – Trade Union calls</p> <p>LM contacted unions, There were 18 cases re: H&amp;B which is line with helpline numbers. Suggest that the union office records H&amp;B cases.</p>	
5	E & D Committee (Terms of Reference)	<p>With reference to the ToR, JS looked at this and said that there is a long list of attendees. We need to have a discussion on who should attend. Only one person fed back on this opportunity to review it for the whole group.</p> <p>It was recognised at the last meeting that the E&amp;D Committee has a governance role; the committee has fed back to Simon Wood and Jayne Stone. We need to establish the purpose of this group and how this impacts on the Integrated Performance Report (IPR).</p> <p>It was agreed that Harry Hayer should look at this.</p>	
6	Annual Equality Report feedback and work priorities for 2014-15	<p>RB asked about the feedback of the Annual Equality Report given to the E&amp;D Committee. LM advised that staff, HealthWatch and the Volunteer group (service users) were asked to comment on whether they agreed with the rating. Amber was given by them, however, Health Watch gave a rating of Red. LM said that NBT didn't agree with this Red rating as need to account for previous achievements. The E&amp;D Committee now have to decide whether the grade is Amber or Red.</p> <p>RB asked what is the current status of the E&amp;D report? LM advised that the contents have been endorsed. RB said that the Workforce Committee would be the next group to endorse the report and then the report will go to the Trust Board. NS suggested this should go to the Public Board meeting as Trust Board only needs this for their information. It was explained that this evidence is to say we are dealing with equality and diversity but this is not fully signed off. RB said that the report needs to go through a business planning cycle and this starts next month.</p> <p>RB said he would be interested to know how other Trusts are doing theirs. RB thinks this should go to the Trust Board; KG was in agreement with this. Trust Board needs to be given this so that they may make comments. Reporting dates need to be in line with our business planning and statistics.</p>	

		<p>KG asked if NBT includes comment from stakeholders? LM said this was done but separately, although we can put this together if needed.</p> <p>NS advised that he doesn't think we need to add comments/feedback. KG said grading is important and doesn't appear Red, but if stakeholders say Red, then we need feedback on why. JS asked what metrics do we have to gather information? RB asked that we have feedback from expert group/Health Watch (local Health Watch covering South Gloucestershire/Bristol). The Diamond Cluster (expert group) and also Foundation Trust members. RB asked did E&amp;D Committee choose these groups? Did E&amp;D Committee give checklist/structure for the feedback? This is included in the EDS. RB said that if we are looking at an annual cycle, we need structure to ask feedback in a structured way in future.</p> <p>JS referred to the organisation grading and E&amp;D Committee should feedback with a more structured approach to feedback.</p> <p>RB said that the Amber assessment is now going forward, but a gap analysis is needed to get us to achieving "Green" organisationally. What we need to do is to align and embed these with the drivers set by Harry Hayer. RB suggested that if we perhaps use an agreed 25 questions, this is more visible and achievable instead of asking for feedback; so for next year we need a different approach.</p> <p>RB and KG commented on the report which gives a good picture of what we have been doing holistically. RB asked all members to view the monitoring report as it gives us a good start and a good steer on equality and where we need to improve. LM said her work is already about staff, that complaints are collected and the highest number are about disability and race.</p> <p>RB asked that the report goes to the Workforce Committee. DL said that Amber would fit better than Red. There are Green and Red in places so overall Amber. KG said that we haven't deteriorated to Red. RB said we need metrics to manage this.</p> <p>KG said the challenge is how do we get this through to the other directorates? Some areas are doing well, so what is the best way of engaging staff to share good practice to share together? How can NBT help this? RB agreed that some areas commit and others don't. Facilities for example have a high level of issues.</p> <p>JS said that with valid feedback we should use what we have and give this to the Trust Board.</p>	
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7	Black and Minority Ethnic (BME) Career Development Group update	<p>LM advised that October is Black History Month and in October 2013, Harry Hayer asked for Board members to be mentors for BME staff. Eight pairs are now matched, 13 people attended a training session on the recruitment process by Peter Russell. BME staff have been invited to be assessors at Assessment Centres re: catering, portering, HCAs etc. The BME group have been notified of dates. LM has drawn up information re: the national NHS BME conference feedback from the 3 members of staff who went.</p> <p>Jenny Symonds said that disabled applicants who declare they are disabled, are provided with support if this is requested, we do our best to address the issue (applicants are anonymous). LM advised that NBT includes information on the jobs page website about disability. Any feedback is welcome to LM.</p> <p>CF mentioned that there are high numbers of BME service users in the Easton Central area and they have just recruited 2 x Somalian Link Workers. CCHP would like our area supported e.g. training, community feedback. JS said that we need to it looking at recruiting e.g. NHS website, applications on line which can be challenging, poor quality of filling in forms. KG suggested that open days, local job centre and promotions e.g. stall at Cabot Circus etc. RB said we need to get together/Employment Services to think of something different. Maybe go to Asian and Caribbean Times newspaper to advertise, conduct local campaigns to work. Need to push forward.</p>	<p><b>All</b> Bring back progression on work we are doing in 6 months</p>
8	Annual Statistics Report	The report has been reformatted and the committee accepted this.	
9	NHS England – EDS/Race Equality standard – proposal to make both mandatory	LM advised that NHS England have proposed that the EDS/Race Equality Standard becomes mandatory. The NBT board has higher representation of BME members than those in London in, percentage wise. The Trust have supported the EDS in principle and reported to NHS England. Should hear back by the end of this year on whether the EDS and RES will be mandatory.	
10	Equality Award	LM to ask the committee to consider whether we should include a category for Equality as part of the Exceptional Health Care award. KG suggested it should be part of it.	
11	E&D Manager's work report	RB commented on priority and objective setting and work should be embedded across the organisation. LM splits the information to help on reporting.	

		RB requested that to do 2 or 3 objectives to produce impact instead of doing all. RB asked for a projection of what is happening within 3 months e.g. Black History Month, World Mental Health Day. (List previously sent). RB asked whether there was a strategic plan and things happening during the year, as this needs to be run through first before committing; these need to be linked into the organisation's priorities. LM replied there is a strategy and measuring impact would be difficult. RB asked how we meet our objectives this is done through reporting on the EDS.	
12	Any other business	DC: LM brings her knowledge to this group and need to be led by LM for future plans.  RB: LM to look at opportunities to bring to the group for the group to discuss.  RB: EIA - effectiveness of EIA any gaps, any issues	
13	Items for next meeting	Family and Friends Test (patients) – JW and LM Annual Complaints report 2013 – SS	
14	Date of next meeting	<b>Post note</b> Tuesday 2 December, 1.30pm-3.30pm Vachell, Level 6, Gate 10, Brunel - confirmed	

### ACTION LIST: SEPTEMBER 2014

Item	Name/s	Action	Deadline
4g		Annual report to go to workforce committee before going to Trust Board.	Done
5	All to reply to JS	Terms of Reference - Suggestion was made re: having a steering group which would guide and oversee the work plan and a 'doing' group. H Hayer may want to redesign structure	Next meeting
6	RB	Speak to HH re: disability/access requirements required re: training.	Oct/Nov 2014 Move training included access for disabled people.

### COMPLETED LIST: SEPTEMBER 2014

Item	Action	Completed by
1	Age – ideas for project – knowledge of transfer mentoring for when staff retire from the Trust	MT: older people may need IT/support
2	Orientation tours for disabled people. LM has met with done this and the hospital is compliant with DDA. Some disabled people were not happy with the access to the entrance to the Brunel building, however there were issues around disabled parking and wheelchair access and SW advised that these issues have been raised separately with Carillion.	LM
3	Patient experience leaflet – liaised with Learning Disability Nurse. LM to go back to Comms.	LM
4	Bed call buttons. SW advised that this was noted however the call buttons are standard and cannot be changed.	SW
4c	E&D Committee reporting – Contact Eric Sanders (new Trust Secretary) to give a view on governance and committee structures.	
4e	Equality notice boards in Brunel – Ask Ruth Sedgwick about a possible space for these.	LM
4g	EIA - 12 hour shifts to be chased.	LM
7	BME mentoring – verbal update given by LM.	LM
8	Harassment & Bullying comparison requested of statistics with Unions info.	LM
9	Publishing staff numbers by band for BME 2013 report, due January 2014. Done and included in report.	LM
10	Recruitment of staff – discuss, summarise and put compliance/assurance recruitment strategy to attract to the widest variety of staff e.g. BME, disabled.	LM
14	New staff engagement post proposed will also have responsibility for E&D. The committee has opportunity to provide comments on consultation. Contact Cathy Meredith for further information.	22.09.14