

**North Bristol
NHS Trust
Equality Information
On How We Meet the
Public Sector
Equality Duty
2012**

Introduction

North Bristol NHS Trust has over 9,000 staff providing hospital and community healthcare to the residents of Bristol, South Gloucestershire and North Somerset. We are also a specialist regional centre for neurosciences, plastics and burns, orthopaedics and renal services.

We are the largest hospital teaching Trust in the South West with links to the University of Bristol, University of Bath and the University of the West of England. We have strengthened our research portfolio over the last year, with around 500 staff involved in 400 separate research projects across the Trust.

NBT has an inclusive equality policy and the Board signed up to the Equality Delivery System in 2011.

We opted to develop and implement a 7-strand, strategic Single Equality Scheme for race, disability, gender, sexual orientation, religion or belief, age and gender identity before the legal requirement was brought in. Outcomes from this are reported to the Equality and Diversity Committee and the Trust Board annually.

This document is a summary of recent activities undertaken by NBT to show how we are meeting the public sector equality duty. The first section contains examples of the equality information we have and some of the steps we take to have due regard to the general duty, the second section is about the next stage in delivering the equality agenda, identifying our equality objectives for the forthcoming year and benchmarking our equality performance against other NHS organisations.

The Equality Act 2010

A single Equality Act for the UK was passed by Parliament and came into force in October 2010. The Act consolidated, strengthened and clarified the existing anti-discrimination legislation and brought in new measures that had direct implications for the Trust.

The new Public Sector Equality Duty (PSED) came into force on the 5th April 2011 and the ban on age discrimination, the provision of goods, services and public functions is scheduled to come into effect in April 2012.

The General Duty

The PSED is supported by a General Duty where the Trust must abide by the three principles of the general duty and have **due regard** to the need to:

- **eliminate unlawful discrimination**, harassment, victimisation and any other conduct prohibited by the Act;
- **advance equality of opportunity** between people who share a protected characteristic and people who do not share it; and
- **foster good relations** between people who share a protected characteristic and people who do not share it.

The Trust must do this by:

- removing or minimising disadvantages suffered by people due to their protected characteristics;

- meeting the needs of people with protected characteristics
- tackling prejudice and promoting understanding between people who share a protected characteristic and others.

The Specific Duty

The PSED is also underpinned by a specific duty which requires us to publish equality information to demonstrate our compliance with the general duty.

Protected characteristics

Protected characteristics are the grounds upon which discrimination is unlawful. The protected characteristics (**section 4**) under the Act are:

- age
- disability
- gender reassignment
- marriage and civil partnership
- pregnancy and maternity
- race
- religion or belief (including lack of belief)
- sex
- sexual orientation

As in previous disability equality legislation, it is permissible to treat a disabled person more favourably than a non-disabled person. It remains lawful to make reasonable adjustments in relation to employment and the delivery of services to ensure that there is true equality of opportunity for disabled people.

The protected characteristics are covered by the PSED with the exception of Marriage and Civil Partnership.

Equality Information

The Trust compiles an annual report of work carried out on the Equality Plan and all departments are invited to submit information of what they done to deliver the actions. These are approved by the Trust Board and published on the NBT internet page along with the equality monitoring statistics which are also collected annually.

The annual equality reports can be viewed at:

[Equality Scheme Report 2010.pdf](#)

[Equality Scheme Report 2011.pdf](#)

The annual statistics report can be viewed at:

[Annual Equality Statistics Monitoring Report 2010.pdf](#)

Meeting the Public Sector Equality Duty 2012

To demonstrate we have met the PSED the monitoring of staff and patients is carried out in a number of ways across the relevant protected characteristics. There is a lack of reporting in some areas, specifically disability, sexual orientation and religion or belief. The lack of data causes difficulties for example in demonstrating the impact of the equality work when compiling EIAs and when making decisions regarding service delivery. Work continues to improve this reporting and a data cleanse exercise is due to be carried out in 2012.

Patients – The last patient survey reported that 97% of patients are treated with dignity and respect. Complaints received from patients for 2010/11 show an average occurrence of 1 in 100 equality related cases. 93% of our patients are very happy with the care they receive from us and every year over 6,000 patients and carers make the time to write us a compliment letter thanking us for the care and attention they received. A small survey at Bristol Pride in 2011 showed that patients felt support was there for them and their partners.

Outpatient satisfaction - the 2011 Picker Institute survey of outpatient experience found that 94% of patients reported their overall rating of care as good, very good or excellent and 86% of outpatients were treated with respect and dignity all of the time. The results were not significantly different from the national average in 68 questions. Results significantly were below the national average in only 3 questions. Action to address these is being taken through the Patient Experience Leads, progress monitored through the Patient Experience Group and outcomes monitored through annual and local surveys.

Policies are embedded to help vulnerable patients and patients with Learning Disabilities are flagged to ensure that adjustments are made.

The new Cerner patient administration/electronic patient record system will capture all protected characteristics except gender reassignment and pregnancy/maternity to help us improve our data capture to demonstrate the impact of our equality activities. This information will show whether we are meeting the needs of all patients to measure patient safety outcomes across all protected characteristics and show how effectively patients and communities are accessing our services.

The Trust has a patient participation and involvement strategy this was strengthened by the Seldom Heard research (2010) which resulted in an action plan. There is a Patient Panel and a Patient Engagement Group. The Bristol and South Gloucestershire Links organisations are invited to comment on relevant documents like the annual Equality Scheme report. Patients and carers report experiences of their treatment and care outcomes and of being listened to and respected by assessment tools like NQAT. New initiatives were put into place to support carers.

The new hospital project has involved disabled people and BME groups to comment on access and way finding. A Young people's charter was developed with service users. Information leaflets were rationalised and many produced in "easy read" format following consultation with people with learning disabilities.

A public consultation about the Foundation Trust status was undertaken that targeted communities falling within the protected characteristics, to ensure they had an opportunity to voice their views and become members.

Two engagement events were held in South Gloucestershire and Bristol. The former noted that NBT provided a very good service and certain areas were highlighted for praise like bereavement support for infant mortality. At Bristol there was a general concern about the need for improved equality data to achieve access to health care.

Staff - A Staff Engagement Strategy has been produced and the implementation strategy is being devised in 2012. All staff are invited to feedback on the Equality Scheme action plans and the Staff Equality Group deal with relevant documents. Annual staff survey results are analysed and follow-up actions agreed and implemented.

Staff Attitude Survey – the 2010 results showed that disabled staff felt they were not being treated appropriately. Additional points were added to the Equality Scheme action plan. More was done to advertise the work being undertaken for disabled staff and it is hoped a positive impact of this will be shown in the 2011 survey. NBT devised a “Positive About Disabled People” statement and a Charter of 10 standards and became a signatory to the “Mindful Employer Charter.” A senior manager became the champion to lead on this.

Following the Staff Attitude Survey Renal established a ‘question time’ slot, where anyone from the directorate can pose any question to the Renal Senior Management Team.

The Trust paid for the additional protected characteristics to be included in the survey for 2010 these were automatically included in 2011.

Recruitment - A new electronic recruitment system was introduced in 2011 and training provided to staff who recruit on this. The new system is being used to recruit to all medical and non medical posts and will provide much improved management information in order for us to drill down more effectively into information about under-represented groups from application through to appointed staff. A new filtering tool has been introduced to make it easier to identify candidates claiming a guaranteed interview under the 2 Ticks Disability scheme.

Training - All new staff attend induction, which includes a section on equalities. There is an e-learning equality package and courses provided by Staff Development, like recruitment have a focus on equality within them. Equality training on specific areas like disability, sexual orientation, gender identity etc are also offered throughout the year.

Harassment and Bullying - Figures of cases reported to Ask HR are low in number and are not statistically significant. There is a high proportion of staff who do not wish to give the equality information when they apply for posts or when contacting Ask HR. Work to identify why this is will be carried out in 2012.

The Trust celebrates history months for Race, Disability and Lesbian, Gay, Bisexual and Trans people. Raising awareness of equality matters is promoted using electronic methods, managers and the Trades Unions are asked to distribute this further.

A BME Mentoring project was launched in October 2011, where BME staff, up to grade 7 were invited to be mentees while all other members of staff were asked to be mentors.

Facilities and the Women's and Childrens' directorates have designated staff to support Gypsy/Traveller/Roma people. Neurosciences Directorate streamlined patient flow through pre-op assessment information ensures patients are offered a choice, the impact of this allows for appropriate ward for transgender patients and meets the religious requirements of others.

Spiritual and Pastoral Care undertake initiatives like bereavement services to meet the needs of all faith groups and to ensure that appropriate end of life information is available to staff.

The Team were commended on the support they give regarding infant deaths by a member of the South Gloucestershire LINKS group in a Community Feedback Forum in November 2011.

Gender identity – Draft guidelines for staff have been compiled and are being consulted on.

NBT won a place on the Stonewall “Healthy Lives” programme to promote positive action and services for lesbian, gay and bisexual people. Two LGB members of staff attend their leadership training course.

Future actions are identified through the EIA process and cover all the protected characteristics for patients and staff.

Leadership – The Trust Board appointed two Equality Champions and signed up to the Equality Delivery System. All submitted Board papers must consider equality matters. The Chief Executive, directors and other senior managers have been involved in equality events, for example, those for BME, Disability and LGBT history months and International Women's Day. Equality Impact Assessments (EIAs) were carried out.

Current Top Leaders programme developed. A talent management strategy is being developed for managers.

Delivering the Equality Agenda

The NHS Equality Delivery System (EDS) is a framework designed to help NHS organisations improve equality performance and embed equality into mainstream NHS business so that we can provide a better service that meets the requirements of people from diverse communities. NBT has worked through the framework to provide evidence to support our grading.

When this is complete it will be used to set our Equality Objectives.

The Trust works closely with the regional NHS cluster to deliver the EDS and is currently working in partnership to gather feedback from communities on the evidence we have produced to support our grading. We are also consulting with the public and staff for their opinion on our service delivery which will have an impact on the assessment.

Outcomes will be used to benchmark against other Trusts regionally and nationally.

Lesley Mansell
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31st January 2012