



**Bridgewater
Community Healthcare**
NHS Foundation Trust

Equality Objectives 2019 - 2022

Inclusion - Equality, Diversity and Human Rights

A series of overlapping, wavy horizontal bands in various shades of blue and teal, creating a dynamic, flowing background effect.

Quality first and foremost

Introduction

The Public Sector Equality Duty requires organisations to have due regard to three aims in relation to protected characteristic groups - eliminating discrimination, advancing equality of opportunity, and fostering good relations between people/groups. Organisations must evidence this annually through reporting, and must publish and undertake specific and measurable equality objectives to further meet the three aims within all areas of business.

There are nine protected characteristic groups – age, disability, gender reassignment, marriage/civil partnership, pregnancy/maternity, race, religion/belief, sexual orientation, and sex (gender). The Trust also recognises other disadvantaged groups with particular health inequalities, including carers, military veterans, homeless/vulnerably housed, sex workers, substance users (drugs, alcohol), and asylum seekers and refugees.

This document sets out the Bridgewater Equality Objectives for 2019 – 2022.

Our equality objectives are grouped into four areas:

- **Improving access for patients and communities with additional and specific needs related to protected characteristics**
- **Improving recording and monitoring of equality information in patient records**
- **Recruiting, developing and retaining a diverse and representative workforce**
- **Understanding and improving staff experience**

Each of the four overarching areas has specific actions relevant to one or more of the three aims of the Equality Duty and these are allocated to the most appropriate team or service to implement.

Progress on work will be reported within the relevant Trust governance structures for services and for workforce.

The plan has been developed in partnership with CCGs and providers in Merseyside, through the EDS2 Partnership - a new approach to EDS2, moving away from the requirement to evidence progress via data, and looking instead to identify and understand barriers and issues for protected characteristic groups through the gathering of equality evidence, through achievement of actions to address these barriers and issues, through ongoing dialogue with stakeholders from protected characteristic groups, and through real change within organisations.

The Equality Objectives in this plan support the Trust's Strategic Objectives:

- **Quality** – to deliver high quality, safe and effective care which meets both individual and community needs
- **Innovation and collaboration** – to deliver innovative and integrated care closer to home which supports and improves health, wellbeing and independent living
- **Sustainability** – to deliver value for money, be financially viable and be commercially successful
- **People** – to be a highly effective organisation with empowered, highly skilled and competent staff

And the Trust Mission of 'improving local health and promoting wellbeing in the communities we serve' through the Values of:

- **Patient centred care**
- **Encouraging innovation**
- **Communicating openly and honestly**
- **Providing a professional, quality service**
- **Being locally led**
- **Being efficient**

1: Improving access for patients and communities with additional and specific needs related to protected characteristics

Area for action	Barrier or issue for equality groups	Mapping/Protected Characteristic Impacted
<p>Reasonable Adjustments Ensuring service awareness, and provision of reasonable adjustments to patients with disabilities (and where appropriate family/carers)</p>	<p>Lack of awareness across NHS and public services of when and how to provide reasonable adjustments. Impact on access, communication, experience and outcome <i>Evidence: Engagement with disability groups, national research from disability groups/organisations</i></p>	<p>EA10 Equality Duty – aims one and two (inc. removing disadvantage, and meeting needs) EA10 Section 20 Duty to Make Reasonable Adjustments Human Rights Act 1998 Section 6 Accessible Information Standard EDS2 – 1.2, 2.1, 2.2, 2.3 Health and Social Care Act 2012 Impacts: age, disability</p>
<p>BSL Support Ensuring effective, high quality, and accessible communication support for our Deaf communities</p>	<p>Lack of awareness, and failure to provide, BSL support and other methods of communication for Deaf community. Impacts on access, effective and safe communication, experience and outcome <i>Evidence: Engagement with disability groups, national research such as Sick of It, and Accessing Public Services: Issues for Deaf People</i></p>	<p>EA10 Equality Duty – aims one and two (inc. removing disadvantage, and meeting needs) EA10 Section 20 Duty to Make Reasonable Adjustments Human Rights Act 1998 Section 6 Accessible Information Standard EDS2 - 1.2, 2.1, 2.2, 2.3 Health and Social Care Act 2012 Impacts: disability</p>
<p>Health Literacy Ensuring our communications and information are accessible</p>	<p>Failure to provide accessible information for people with disabilities and sensory impairments, and for people with lower literacy or English as a second language <i>Evidence: National research, local literacy data, service feedback</i></p>	<p>EA10 Equality Duty - aims one and two (inc. removing disadvantage, and meeting needs) EA10 Section 20 Duty to Make Reasonable Adjustments Human Rights Act 1998 Section 6 Accessible Information Standard EDS2 - 1.2, 2.1, 2.2, 2.3 Health and Social Care Act 2012 Impacts: age, disability, race, other excluded groups</p>
<p>Interpretation and Translation (Community Languages and BSL) Development of quality standards for interpretation and translation provision</p>	<p>Poor access, experience and outcome. Impact on long term health. Potential patient safety impact <i>Evidence: Race Equality Foundation, NHS England Community Language Standard, Sick of It report, local engagement with Liverpool Deaf community (May 2018)</i></p>	<p>EA10 Equality Duty - aims one, two (inc. removing disadvantage, and meeting needs) and three EA10 Section 20 Duty to Make Reasonable Adjustments Human Rights Act 1998 Section 6 Accessible Information Standard</p>

Area for action	Barrier or issue for equality groups	Mapping/Protected Characteristic Impacted
		EDS2 – 1.2, 1.2, 2.1, 2.2, 2.3 Health and Social Care Act 2012 Impacts: age, disability, race
<p>Low Tech Communications Support Support for Halton Adult SLT to develop, pilot and rollout innovative communications support tool</p>	Service identified need for low tech communication tool to support access in Trust settings, particularly urgent care and unplanned contacts, for people with communication needs arising from disability, language needs, or just when having difficulties communicating	EA10 Equality Duty - aims one and two (inc. removing disadvantage, and meeting needs) EA10 Section 20 Duty to Make Reasonable Adjustments Human Rights Act 1998 Section 6 Accessible Information Standard EDS2 - 1.2, 1.4, 2.1, 2.2, 2.3 Health and Social Care Act 2012 Impacts: disability
<p>Service Access Information Provision of access information for every service available on service webpages</p>	Accessing clinics and other venues for appointments can be difficult for some protected characteristic groups, for example people with disabilities including ASD, and some older people travelling to a new location. Others may just require more information to allow them to travel to a clinic, for example new arrivals to the area. By providing information on service webpages of opening times, access into and within the buildings, travel information and other details we can help people to access our venues, or can allow them to let us know if they may have issues accessing	EA10 Equality Duty - aims one and two (inc. removing disadvantage, and meeting needs) EA10 Section 20 Duty to Make Reasonable Adjustments Human Rights Act 1998 Section 6 Accessible Information Standard EDS2 – 1.1, 1.2, 2.1, 2.2, 2.3 Health and Social Care Act 2012 Impacts: disability, age, race, and others
<p>Military Veterans Implementing the Armed Forces Covenant throughout the Trust</p>	Military veterans are known to have some particular health issues in relation to their service. The Trust has an obligation as a provider of NHS services to meet the requirements of the Armed Forces Covenant, and to support its veterans, reservists and active members of the armed forces <i>Evidence: Armed Forces Covenant</i>	EA10 Equality Duty - aims one, two (inc. removing disadvantage, and meeting needs) and three Human Rights Act 1998 Section 6 Armed Forces Covenant Impacts: veterans
<p>Fathers Engaging and supporting fathers through pregnancy and maternity, to age 2</p>	Evidence shows that fathers have a large role to play in pre and post natal care, but they are often not include in discussions about mother and babies health and wellbeing, and their own wellbeing is often not discussed <i>Evidence: 1000 Days Challenge</i>	EA10 Equality Duty - aims one and two (inc. removing disadvantage, and meeting needs) Human Rights Act 1998 Section 6 Impacts: sex

Area for action	Barrier or issue for equality groups	Mapping/Protected Characteristic Impacted
<p>Dementia Create dementia friendly services and venues</p>	<p>The number of people with dementia is increasing. Dementia can affect not just the elderly but also the young with around 40,000 people in the UK with diagnosed early onset dementia. It is possible to live well with dementia, and public services can support this by ensuring public areas are dementia friendly and by providing information on this to the people they serve. <i>Evidence: Alzheimer's Society Building Dementia Friendly Communities; JRF On The Road to Becoming a Dementia Friendly Organisation, and others</i></p>	<p>EA10 Equality Duty – aims one and two (inc. removing disadvantage, and meeting needs), and three Human Rights Act 1998 Section 6 EDS2 – 1.1, 1.2, 1.3, 1.4, 2.1, 2.2, 2.3 Impacts: age, disability, sex</p>
<p>Engagement Increase Trust engagement with seldom heard groups, in consultation and in information gathering exercises</p>	<p>Only by engaging with different groups in the communities we serve can be really understand and address differing needs We also have a legal obligation to consult when making changes to services that impact on people</p>	<p>EA10 Equality Duty - aims one and two (inc. meeting needs and encouraging participation) EDS2 – 1.1, 2.1 Health and Social Care Act 2012 LD Improvement Standards Impacts: all protected characteristic and excluded groups</p>
<p>Learning Disability Improvement Standards Ensuring Trust compliance and improvement in relation to the Standards</p>	<p>Evidence shows that people with learning disabilities suffer disadvantage in experience and outcome, and discrimination in access to services. This leads to early mortality, general poor health and wellbeing, and impacts on family members and carers too. <i>Evidence: Mencap – Death by Indifference, Six Lives and others</i></p>	<p>EA10 Equality Duty - aims one and two (inc. removing disadvantage, meeting needs, and encouraging participation) Human Rights Act 1998 Section 6 EDS2 – all patient focused goals 1 and 2 LD Improvement Standards Accessible Information Impacts: disability</p>

2: Improving recording and monitoring of equality information in patient records

Action	Barrier or issue for equality groups	Mapping/Protected Characteristic Impacted
<p>Referrals – equality data and flagging</p> <p>Ensuring that, with patient consent, we receive all relevant information to allow for effective and safe first and continuing contact with people referred to all our services</p>	<p>We can ensure we meet equality needs from the very first contact with a patient and their family/carers, if we are given the right information in referrals. For example we can telephone or email someone who has a visual impairment, rather than writing to them; we can arrange a different method of arranging a first appointment for someone who is Deaf; or we could ensure we had an interpreter booked for someone who has communication needs. This avoids DNAs, failure to make first appointments, rearrangement of appointments, and just improves patient experience</p> <p><i>Evidence: Accessible Information Standard, Language Interpretation for Primary Care Standard, and others</i></p>	<p>EA10 Equality Duty – aims one and two (inc. removing disadvantage, and meeting needs)</p> <p>Human Rights Act 1998 Section 6</p> <p>EDS2 – 1.2, 1.3, 1.4, 2.1, 2.2, 2.3</p> <p>Health and Social Care Act 2012</p> <p>Accessible Information Standard</p> <p>Sexual Orientation Monitoring Standard</p> <p>Impacts: all protected characteristic and excluded groups, military veterans</p>
<p>Patient Records</p> <p>Ensuring that in all services the following are recorded:</p> <ul style="list-style-type: none"> • Equality data • Reasonable adjustments • Language needs • LD flag • Dementia flag • Military veterans • Sexual orientation <p>Intersex/Non-Binary</p>	<p>As above, we can improve patient experience and outcome if we meet particular needs, and this is achievable when records (with consent) provide relevant equality information</p> <p>This is also a gap that is identified within the Trust for carrying out effective monitoring of services, for example for EqIA</p>	<p>EA10 Equality Duty - aims one and two (inc. removing disadvantage, and meeting needs), and three</p> <p>Human Rights Act 1998 Section 6</p> <p>EDS2 - 1.2, 1.3, 1.4, 2.1, 2.2, 2.3</p> <p>Health and Social Care Act 2012</p> <p>Accessible Information Standard</p> <p>Sexual Orientation Monitoring Standard</p> <p>Impacts: all protected characteristic and excluded groups, military veterans</p>
<p>0 – 19s Health Records</p> <p>Ensuring that child and young people’s health records are recording all relevant information, and that this meets equality legislation</p>	<p>This was flagged by a number of services/staff as an area that they would like to address. Currently the 0 – 19 health records for the Trust can’t accurately record, consistently across some service, some equality data, for either the child/young person or their family</p>	<p>EA10 Equality Duty - aims one and two (inc. removing disadvantage, and meeting needs), and three</p> <p>Human Rights Act 1998 Section 6</p> <p>EDS2 – 1.1, 1.2, 1.3, 1.4, 1.5,</p> <p>Impacts: age, disability, sex, marriage and civil partnership, pregnancy and maternity, LGB, transgender</p>
<p>Intersex/Non-Binary</p> <p>Review of records and data collection that need updating</p>	<p>Some individuals are registered at birth as intersex, at present they are not protected by the Equality Act explicitly, but the Trust</p>	<p>EA10 Equality Duty - aims one and two (inc. removing disadvantage, encouraging participation, and meeting</p>

Action	Barrier or issue for equality groups	Mapping/Protected Characteristic Impacted
<p>to include these options, such as:</p> <ul style="list-style-type: none"> • FFT <p>Complaints</p>	<p>recognises that they have particular needs and difficulties that can be better addressed if records are accurate</p> <p>In addition there are a number of people with different gender identities to the binary system of the UK, they may be agender, non-binary or gender fluid for example. The Trust needs to ensure that records and monitoring forms allow people to self-identify, if they choose, outside of the binary options</p>	<p>needs), and three</p> <p>Human Rights Act 1998 Section 6</p> <p>EDS2 – 1.2, 1.3, 1.4, 1.5, 2.2, 2.3, 2.4</p> <p>Impacts: sex, LGB&T</p>
<p>Gender Reassignment</p> <p>Developing records, policy, guidance, training and awareness to support transition and different gender identities in the workforce and in services</p>	<p>People covered under the protected characteristic of gender reassignment are often the most marginalised in society, experiencing discrimination, lack of understanding, ignorance and bigotry and hate crime. In terms of health there are health inequalities, particularly in relation to mental health , and there are particular needs for example in health and cancer screening</p>	<p>EA10 Equality Duty - aims one and two (inc. removing disadvantage, encouraging participation, and meeting needs), and three</p> <p>EDS2 – 1.1, 1.2, 1.4, 1.5, 2.1, 2.2, 2.3, 2.4</p> <p>Navajo Charter Mark</p> <p>Impacts: gender reassignment</p>

3: Recruiting, developing and retaining a diverse and representative workforce

Action	Barrier or issue for equality groups	Mapping/Protected Characteristic Impacted
<p>Staff Records Look at improving recording, including self-recording of equality data in ESR records, particularly for disability, LGB, and BAME</p>	<p>We can better understand how representative we are of our communities, and how our workplace policies, procedures and environment impacts on different groups if we have high quality, robust data</p> <p>The equality data in ESR is flagged as a gap as we have a large number of blank or unknown records for certain protected characteristic groups</p>	<p>EA10 Equality Duty – aims one, two ((inc. removing disadvantage, encouraging participation, and meeting needs), and three</p> <p>Specific Duties 1 and 2</p> <p>WRES</p> <p>EDS2 – all goal 3</p> <p>WDES</p> <p>Disability Confident</p> <p>Working Forward</p> <p>GPG</p> <p>Staff Survey</p> <p>Quality & Place Strategy</p> <p>Impacts: all</p>
<p>Workforce Planning Develop a plan/strategy that supports the recruitment, retention and career progression of people from protected characteristics in the workforce – with the aim of creating diverse teams that reflect the areas we serve and that meet different needs through innovation, collaboration, and effective team work.</p> <p>Including apprenticeships, work experience, and other opportunities, e.g. Leonard Cheshire programme, and targeted efforts in relation to learning disabilities and difficulties; addressing gender pay gap.</p> <p>Advertising vacancies to under-represented groups.</p> <p>BME or disability representative on interview panels for senior and executive posts.</p> <p>Step Into Health, and Armed Forces Employer Recognition Scheme.</p>	<p>Evidence shows that there are particular groups within employment that suffer discrimination and disadvantage. This is from the struggle to find employment (for example people with disabilities), to career progression (again people with disabilities, and also BAME groups), to the experience of discrimination, violence and harassment in work</p> <p>Women can struggle to progress in their careers from lack of flexible working opportunities</p> <p>Carers can struggle to remain in work as a result of inflexible working practices and lack of understanding from managers and employers</p> <p>Evidence shows that in the UK there is a high percentage of discrimination in relation to pregnancy and maternity</p> <p>The NHS, and Trust, workforce is aging, and we need to support these older, experienced staff, and also consider how we recruit and develop younger staff who often have very different expectations of the workplace</p>	<p>EA10 Equality Duty – aims one, two ((inc. removing disadvantage, encouraging participation, and meeting needs), and three</p> <p>Specific Duties 1 and 2</p> <p>WRES</p> <p>EDS2 – all goal 3</p> <p>WDES</p> <p>Disability Confident</p> <p>Working Forward</p> <p>GPG</p> <p>Staff Survey</p> <p>Quality & Place Strategy</p> <p>Impacts: age, disability, race/ethnicity, sex, pregnancy and maternity, military veterans and other excluded groups</p>

Action	Barrier or issue for equality groups	Mapping/Protected Characteristic Impacted
<p>Volunteer Programme Development Look at further developing the volunteer programme across the Trust:</p> <ul style="list-style-type: none"> • BME/bilingual • Disabilities – inc. mental health, learning disabilities, ASD • Older people • Out of work, career or family breaks • Developing volunteering into each service delivery model 	<p>Volunteers play an invaluable role in the NHS, and this is picked up in the Ten Year Plan</p> <p>Volunteers recruitment needs to be inclusive, we need to ensure that our recruitment processes support the second aim of the Duty or advancing opportunity by encouraging participation</p> <p>Our volunteers can help us understand and reach out to our diverse communities</p> <p>And a good volunteer programme can support individuals to gain skills and experience that can help them into the workplace</p>	<p>EA10 Equality Duty - aims one, two ((inc. removing disadvantage, encouraging participation, and meeting needs), and three</p> <p>EDS2 – 3.1, 4.1</p> <p>Five Year Forward View</p> <p>Public Services (Social Value) Act 2012</p> <p>Quality & Place Strategy</p> <p>Impacts: age, disability, race/ethnicity, sex</p>
<p>Flexible Working Further promotion of options, including shared parental leave</p>	<p>Carers, people with disabilities and women in particular are affected by lack of flexible working options, but it can impact on many others</p> <p>Employment law makes provision for anyone to request flexible working, with certain conditions</p>	<p>EA10 Equality Duty - aims one, two ((inc. removing disadvantage, encouraging participation, and meeting needs), and three</p> <p>EDS2 – 3.5</p> <p>GPG</p> <p>EDS2</p> <p>Staff Survey</p> <p>Disability Confident</p> <p>Working Forward</p> <p>Impacts: age, disability, gender, carers</p>
<p>Equal Pay Audit Undertake equal pay audits, including:</p> <ul style="list-style-type: none"> • Sex • BAME • Disability 	<p>Equal pay still exists as an issue, despite many years of legislation</p> <p>The Trust undertakes the annual Gender Pay Gap analysis, but this provides different data to an equal pay audit</p> <p>Equal pay issues also exist for people with disabilities and for BAME people</p>	<p>EA10 Equality Duty – aims one and two</p> <p>Specific Duty 1</p> <p>GPG</p> <p>EDS2</p> <p>WRES</p> <p>WDES</p> <p>Impacts: sex, race, disability</p>
<p>Training Produce training for managers and staff to further understanding and awareness of:</p> <ul style="list-style-type: none"> • Cultural competence 	<p>Staff understanding and awareness, or lack of, is often cited as a reason behind poor experience and discrimination</p>	<p>EA10 Equality Duty – aims one, two and three</p> <p>GPG</p> <p>EDS2 – 1.2, 1.4, 2.2, 2.3, 2.4, 3.3, 3.4, 3.6</p> <p>Navajo Charter Mark</p>

Action	Barrier or issue for equality groups	Mapping/Protected Characteristic Impacted
<ul style="list-style-type: none"> • Disability • LGB • Gender Reassignment 		Disability Confident Impacts: race, religion, disability, LGB&T
<p>Reasonable Adjustments and Access to Work</p> <p>Look at creating an overarching procedure for the provision of reasonable adjustments to staff, working within existing policies and procedures.</p> <p>Look at methods to monitor and gain feedback on reasonable adjustments</p>	<p>Staff with disabilities have been evidenced as having a poorer experience of the workplace, for example in career development, training opportunities, and harassment and bullying</p> <p>Reasonable adjustments are one step towards improving staff experience and supporting staff to remain and thrive in work</p>	EA10 Equality Duty – aims one, two (inc. removing disadvantage, meeting needs, and encouraging participation) and three EDS2 – all of goal 3 WDES Disability Confident Staff Survey Impacts: disability

4: Understanding and improving staff experience

Action	Barrier or issue for equality groups	Mapping/Protected Characteristic Impacted
<p>EDI Steering Group Development of EDI steering group to guide and oversee all inclusion and equality work in the Trust, and to involve external parties such as HealthWatch and our public governors</p>		<p>EA10 Equality Duty and Specific Duties WRES WDES Disability Confident Navajo Impacts: all protected characteristic and other groups</p>
<p>Equality Objectives for Executive Team Develop equality objectives for the executive team on an annual basis Look at developing this for service and team leaders</p>		<p>EA10 Equality Duty and Specific Duties EDS2 – 4.1 WRES WDES Disability Confident Navajo Impacts: all protected characteristic and other groups</p>
<p>Staff Networks Develop staff networks for:</p> <ul style="list-style-type: none"> • BME • Disability • Carers • LGB&T 		<p>EA10 – Equality Duty and Specific Duty 1 EDS2 – all goals 3, 4.1 EDS2 WRES WDES Disability Confident Navajo Charter Mark Impacts: disability, race, LGB&T</p>

Contact Details

Ruth.besford@bridgewater.nhs.uk Tel: 01942 482992 TypeTalk: 18001 01942 482992