Sherwood Forest Hospitals NHS Trust

Race Equality Scheme and Action Plan

2005-2008
CONTENTS

Foreword from the Chief Executive

1.0 Introduction
   1.1 Background
   1.2 General Duties
   1.3 Specific Duties
   1.4 Employment Duties

2.0 Sherwood Forest Hospitals NHS Trust

3.0 The Ethnic Profile of Central Nottinghamshire and our Workforce

4.0 Our Values, Principles and Standards to promote Race Equality

5.0 Delivering our Race Equality Scheme

6.0 National Drivers

7.0 Consultation

8.0 Monitoring & Review of the Scheme

9.0 Appendices

   Appendix A – Action Plan 2005-2008
   Appendix B – Diversity & inclusivity Working Group
                Draft Terms of Reference
FOREWORD

Our commitment to Promoting Racial Equality within Sherwood Forest Hospitals NHS Trust

Since the inception of the Race Relations (Amendment) Act 2000 and subsequent development of our first Race Equality Scheme, Sherwood Forest Hospitals NHS Trust has made good progress to embed the principles of equality of opportunity into all aspects of work and remains committed to further positively promoting racial equality.

Within the last three years, much progress has been made within the organisation, reflecting our commitment to ensure that provide equality of opportunity for our staff and patients. The Trust achieved Improving Working Lives Practice Accreditation in 2003 and is currently being assessed for Practice Plus level accreditation. To support this work, an Equality & Diversity Project group was established within the Trust. The work of this Group will now be revised to acknowledge the work completed to date, coupled with the further work that needs to be undertaken to meet the requirements of the Scheme over the coming three years.

In addition to the redevelopment of hospital facilities, which will bring about modern and streamlined healthcare provision for our communities, the Trust is currently embarking on becoming an NHS Foundation Trust, and we believe that the freedoms afforded by this status will able us to respond more effectively to the current and future needs of our service users. Implementing our Membership Strategy will enable us to ensure that under-represented groups will have an active involvement in how we shape and deliver our future healthcare services.

Reviewing our Scheme has given the Trust an opportunity to reflect on the good work and progress we have made to date to fulfil our obligations and make cultural changes in our approach and attitude to the work we do. We must not, however, become complacent of our responsibilities and therefore pledge our continued commitment to further progress this work and ensure racial equality is forever present within our Trust.

Jeffrey Worrall
Chief Executive
1.0 Introduction

1.1 Background

The Race Relations Act 1976 ("the 1976 Act") provides the specific legislative base for action taken to address the issue of racial discrimination within Britain. The 1976 Act was significantly strengthened as a result of the recommendations that came out of the Report of the Stephen Lawrence Inquiry, aimed at ensuring public authorities conduct themselves lawfully towards the black and minority ethnic population which they serve.

The Race Relations (Amendment) Act 2000, which came into effect on 2 April 2001, strengthens and extends the scope of the 1976 legislation and has two main provisions. The first is that it places a positive duty on public authorities named in the Schedule to the Act to promote racial equality and eliminate unlawful discrimination (sometimes referred to as the ‘general’ duty). Secondly, it makes it unlawful for a public authority to discriminate on race grounds in carrying out any of its functions.

1.2 General Duties

A general duty is placed on all public authorities to have due regard to:

- Eliminate unlawful racial discrimination;
- Promote equality of opportunity; and
- Promote good race relations between people of different racial groups

There are also four underlying principles that support the implementation of the general duty:

i. Promoting race equality is obligatory for all public authorities listed in Schedule 1A to the Act
ii. Public authorities must meet the duty to promote race equality in all relevant functions
iii. The weight given to race equality must be proportionate to its relevance
iv. The elements of the duty are complementary, as they are all necessary to meet the whole duty

1.3 Specific Duties
In addition to the general duty to promote Racial Equality, the Home Secretary has imposed specific duties on those bodies subject to the general duty. The specific duty came into effect on 31 December 2001, requiring the Trust to publish a Race Equality Scheme by 31st May 2002. The purpose of the Scheme was to demonstrate how we intend to meet the general duty to tackle racial discrimination, promote equality of opportunity and promote good relations. The Act requires that a public authority Scheme must produce a comprehensive action plan, with clear targets.

In particular, the Race Equality Scheme should state:

(a) which of the Trust’s functions and policies, or proposed policies, are relevant to the general duty to promote racial equality

(b) what the Trust’s arrangements are for:

- assessing and consulting on the likely impact of our policies on the promotion of race equality;
- monitoring our policies for any adverse impact on the promotion of race equality;
- publishing the results of such assessments, consultation and monitoring;
- ensuring public access to the information and services we provide;
- training staff in connection with the duties imposed by the new Act and the specific and general duties.

(a) our arrangements for reviewing the assessment referred to in (a) within three years from 31st May 2002, and within each further period of three years.

1.4 Employment Duties

The specific duty also requires us to carry out the following activities in relation to employment issues:

(a) monitor the ethnicity of:

- staff in post;
- applicants for jobs;
- promotion; and
- training.

(a) monitor the ethnicity of and analyse the subsequent results from:

- grievances;
disciplinary action;
performance appraisal (when this results in benefits and sanctions);
training; and
dismissals and other reasons for leaving; and

(a) publish annually the results of the above ethnicity monitoring.

In accordance with our responsibilities to meet the Specific Duty, Sherwood Forest Hospitals NHS Trust are committed to review their Scheme every three years and have developed the Action Plan given at Appendix A, to demonstrate action that will be undertaken to further embed equality of opportunity and non-discriminatory practice in all aspects of our business. This document will be subject to continual review, development and improvement to ensure that we demonstrate our commitment to eliminating any adverse impact on race equality throughout the business of the Trust.

2.0 Sherwood Forest Hospitals NHS Trust

Sherwood Forest Hospitals NHS Trust was established on 1 April 2001 and provides general hospital services to the population of Central Nottinghamshire, from four hospital sites. The Trust has a number of key values, which were developed in conjunction with staff and other stakeholders, shortly after the Trust was established, and are:

• Provide the best possible patient care, based on evidence and in a culture that encourages continuous improvement
• Listen and understand what patients have to say, and encourage their involvement in decisions about their care
• Provide a clean, healthy and welcoming hospital environment for patients, visitors and staff
• Improve the patient’s experience of care at the hospitals, respecting their privacy and preserving their dignity
• Have open and honest communication between staff and with patients
• Recognise the contribution of staff by developing and supporting them to do their jobs better and involving them in decision-making
• Provide high quality services through working in partnership

Underpinning the Trust’s key values are the Trust’s strategic aims, which set the vision and core purpose of the organisation, these being:

- To be a secondary care provider of choice for the Central Nottinghamshire Community
We want to ensure that we meet our local community’s needs, providing high quality care and being ‘customer’ focused and easy for patients, health care professionals and other partner organisations to relate to. Our core business is the continued provision of comprehensive and accessible secondary care service to our local population.

- To develop services which meet the specific health needs of our local population(s)

We want to move forwards from delivering services that meet national requirements and build on our success in working collaboratively with our partners to develop services that relate specifically to the particular health needs of Central Nottinghamshire.

- To extend the range and integration of services provided locally for the local population

We want to build new and extended partnerships with other healthcare providers to extend the range of services available locally and support the delivery of more streamlined and integrated care pathways.

- To achieve and maintain a modern workforce

We want to be a model employer providing flexible, well-designed jobs that stimulate people and enable us to recruit and retain a workforce that is equipped to provide the range, level and quality of services to our local population.

At the time of reviewing this Scheme, Sherwood Forest Hospitals NHS Trust is currently in the process of applying to become an NHS Foundation Trust, effective from 1 April 2006. One of the key opportunities from this change in public accountability is the requirement to ‘recruit’ individuals from the local population become a ‘member’ of the Trust, with their purpose being to contribute to shaping future services that they Trust will deliver. One of the criteria for determining membership representation will be that of ethnic background, thus ensuring that all sectors of the community have ‘a voice’ in shaping the future services that the Trust will provide.

3.0 The Ethnic Profile of Central Nottinghamshire and our Workforce

The table below shows the current ethnic profile for the populations of Mansfield, Ashfield and Newark & Sherwood, in Central Nottinghamshire, as per the 2001 Census.
| Ethnic Origin               | SFHT workforce (Number) as at 09/05 | SFHT workforce (%) as at 09/05 | Population* (Number) | Population %
|----------------------------|-------------------------------------|---------------------------------|----------------------|------------------
| White                     | 3571                                | 91.28                           | 311680               | 98.10            |
| Any other mixed           | 2                                   | 0.05                            | 1758                 | 0.55             |
| Indian                    | 117                                 | 2.99                            | 981                  | 0.31             |
| Pakistani                 | 26                                  | 0.66                            | 238                  | 0.07             |
| Bangladeshi               | 6                                   | 0.15                            | 192                  | 0.06             |
| Any other Asian Group     | 16                                  | 0.41                            | 195                  | 0.06             |
| Caribbean                 | 17                                  | 0.43                            | 547                  | 0.17             |
| African                   | 27                                  | 0.69                            | 166                  | 0.05             |
| Any other Black background| 4                                   | 0.10                            | 613                  | 0.19             |
| Chinese                   | 14                                  | 0.36                            | 1120                 | 0.35             |
| Any other Ethnic Group    | 27                                  | 0.69                            | 263                  | 0.08             |
| Not stated                | 85                                  | 2.17                            |                      |                  |

* Local population consists of Mansfield, Ashfield and Newark & Sherwood areas
Taken from 2001 census

Whilst the majority of the Trust’s patients live in these localities, approximately 14% of our patients come from other areas, particularly North East Derbyshire and the Amber Valley within Southern Derbyshire.

The area of central Nottinghamshire varies considerably in terms of urbanisation, deprivation and population concentration. The main hubs of population are focused around the towns of Mansfield, Newark and Ashfield. The higher levels of urbanisation in and around Mansfield and Ashfield are matched with increased levels of deprivation and health need.

As can be seen from the information provided in the table above, the workforce of Sherwood Forest NHS Trust is slightly over-representative of the local population which we serve, with the main differences being a 6.82% under-representation of the white population and we employ 2.68% more staff of Indian origin than is representation of our patient population. 49% or this same population are male and 51% are female.

### 4.0 Our Values, Principles and Standards to Promote Race Equality

Sherwood Forest Hospitals NHS Trust shall positively address areas where adverse impact may result in non-equitable treatment for different racial groups, and will take steps to eliminate such negative impact in meeting the general duty. We intend to ensure that our values reflect the needs and aspirations of the black and minority ethnic populations by engaging with minority ethnic groups and communities in a proactive and meaningful way.
5.0 Delivering Our Race Equality Scheme

Sherwood Forest Hospitals NHS Trust will proactively meet the General Duty as detailed in this Scheme, in all areas of our work, through the execution of our revised action plan. We shall ensure that race equality is further embedded within our performance management processes, as both an employer and a large NHS service provider, building on the work already undertaken from the inception of our original Scheme and action plan. We shall continue to work with our stakeholders and our population in meeting our obligations.

6.0 National Drivers

There are a number of key initiatives within the NHS that provide some key policy and locality led drivers in promoting race equality and diversity:

The Vital Connection, An Equalities Framework for the NHS, introduces a range of indicators, standards and national targets for the NHS from April 2000, on disability, tackling harassment, achieving a representative workforce and board training on equality and diversity. The framework provides comprehensive information on developing a workforce that is capable of delivering fair, appropriate, accessible and responsive services and provides an introduction to the expectations of the NHS in delivering and mainstreaming equalities.

Improving Working Lives is a national initiative aimed at supporting NHS organisations become and employer of choice for existing staff and the future workforce. To achieve Practice Plus accreditation, the highest Standard achievable within the initiative, NHS organisations, in conjunction with representatives, are required to demonstrate that they have fully embraced best employment practices, HR management is integral to the delivery plans of the organisation and staff have access to the benefits of modern working practices.

Positively Diverse, Working Lives: Programmes for Change is a national organisational development plan that aims to change the culture of NHS organisations. The programme has been developed to encourage local action to create an environment in which diversity is normal and valued. The programme provides a strategic approach to addressing equality and diversity and a systematic way to tackling diversity issues. The programme helps organisations to map out where they are in relation to equality and diversity, design and implementation actions, measure progress and maintain momentum.
Sir Nigel Crisp’s 10-point Action Plan on Leadership and Race Equality outlines where NHS organisations need to lay greater prominence in ensuring the needs of patients from ethnic minorities are met and health inequalities reduced, and that we utilise the often underused skills of ethnic minority groups through ensuring their access to appropriate recruitment and development opportunities.

Creating a Patient-Led NHS – delivering the NHS Plan reinforce the principle that everyone involved in the NHS respects people for their knowledge and understanding of their own experience, that health services ensure that people always feel valued and are treated with respect, dignity and compassion, and that our information services provide appropriate and relevant access to information in a variety of languages and formats.

The Trust will build on national initiatives, to develop and progress our local equality and diversity agenda.

7.0 Consultation

Sherwood Forest Hospitals NHS Trust will use its existing processes to consult on the implementation of our revised Scheme. This will include our stakeholders, staff, service users and partner organisations within the local health community, to ensure that we fulfil our obligations and meet the needs of our service users and representative workforce.

8.0 Monitoring and Review of the Scheme

Monitoring and subsequent review of the Scheme will be undertaken by the Trust’s Diversity & Inclusivity Working Group, and will be directly accountable to the Trust’s Human Resource Committee. Relevant monitoring information collated through the execution of the action plan, will be reported to the Trust Board on a twice-yearly basis to inform any decision-making and priority setting, as deemed appropriate to ensure compliance with the Act and our Trust’s Scheme. The Terms of Reference for this Working Group can be found at Appendix B.

Our Race Equality Scheme is a live, working document which will be updated and developed to acknowledge the progress undertaken to ensure discrimination is eliminated for all aspects of our work and business.
## Appendix A - Race Equality Scheme Action Plan

<table>
<thead>
<tr>
<th>Area</th>
<th>Action</th>
<th>Lead</th>
<th>Completion Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessing functions and policies, or proposed policies for relevance to meeting the General Duty</td>
<td>Review functions to be met by the General Duty as part of the annual business planning process for each respective Division, in line with corporate objectives, to ensure the General Duty is met. Identify any further appropriate Divisional responsibilities (functions/objectives) required to meet the General Duty. Assess any new functions for how they will ensure obligations are met. Review existing Trust policies and procedures to ensure compliance with General Duty. Develop programme of work within Trust for reviewing all Policies and Procedures. Review policies and procedures under development to ensure the General Duty has been met prior to approval and implementation. Re-establishment of the Trust’s Diversity &amp; Inclusivity Project Group. The Group will oversee that the actions of the Race Equality Scheme 2005-2008 action plan are undertaken within the Trust.</td>
<td>Chief Executive and Divisional Managers, Executive Team, Executive Team, Director of Human Resources</td>
<td>April - June 2006, Immediate action and on-going, Immediate action and on-going, November 2005 and on-going</td>
</tr>
<tr>
<td>Arrangements for assessing and consulting on the likely impact of proposed policies on the promotion of race equality</td>
<td>Compile a list of all Trust Policies and Procedure. Develop a rolling programme of work for reviewing policies and procedures. Incorporate an equality impact assessment within review process</td>
<td>Executive Team</td>
<td>Immediate action and on-going</td>
</tr>
<tr>
<td>Monitoring policies for any adverse impact on the promotion of race equality</td>
<td>Compile a list of all Trust Policies and Procedure. Develop a rolling programme of work for reviewing policies and procedures. Undertake an equality impact assessment on existing and proposed policies to ensure that racial groups will not be adversely affected their purpose. Ensure monitoring mechanisms are in place to review impact on racial groups.</td>
<td>Executive Team</td>
<td>Immediate action and on-going</td>
</tr>
<tr>
<td>Arrangements for publishing assessment, consultation and monitoring reports (internal)</td>
<td>Review existing processes for publishing and consulting on Trust strategies, reports and documents to ensure that minority ethnic groups are not adversely affected in respect of access to information, format and ability to contribute to consultation process</td>
<td>Executive Team</td>
<td>December 2005</td>
</tr>
<tr>
<td>Arrangements to make sure the public have access to information and services</td>
<td>Review Communications Strategy to ensure mechanisms for communicating with the public and users meets the General Duty</td>
<td>Head of Community Relations</td>
<td>March 2006</td>
</tr>
<tr>
<td></td>
<td>Review existing provision of interpreter services to ensure that a readily accessible service is in place which meets patient need</td>
<td>PPI Manager/Head of Comm Relations</td>
<td>December 2005</td>
</tr>
<tr>
<td></td>
<td>Monitor take up of services by racial group to identify where further work may be required to provide information, in different formats on services, and access to such services, in languages other than English. Re-establish the Trust Patient Information Group to develop and implement any identified actions</td>
<td>Executive Team</td>
<td>December 2005</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Head of Comm Relations</td>
<td>February 2006</td>
</tr>
<tr>
<td>Arrangements for training staff</td>
<td>Review existing process for monitoring take up of training by ethnic group, to ensure ‘take up’ is representative of workforce profile by ethnicity (part of existing training records system)</td>
<td>T&amp;D Manager</td>
<td>December 2005</td>
</tr>
</tbody>
</table>
| Employment Duties – monitoring of staffing information in relation to racial equality | Monitor captured data on workforce ethnicity to identify percentage of staff not stating their ethnic background. Contact all identified staff, asking for their consent to release and provide this information. Undertake a quarterly review to capture new starters who have not provided this data, on commencement with the Trust. Review existing data capture processes for, and monitor activity of:  
- Applications for employment  
- Staff invoking grievance procedure  
- Staff subject to disciplinary action  
- Staff ceasing employment by ethnic group. Incorporate statistics in HR Performance Reporting. | Human Resource Manager | November 2005 |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Review process for promoting training and development opportunities to ensure equity in access to information and ‘take up’ of training. Review training content to ensure delivery meets needs of delegates, by ethnic background. Introduce a system, through the Knowledge and Skills Framework, to capture information on career progression of workforce by racial group. Review induction programme to assess content of equality and diversity session within corporate programme, and revise, as appropriate, to ensure all new starters have an understanding of the Trust's principles in relation to non-discriminatory employment practices. Introduce mandatory HR skills training for senior/line managers which includes training on their responsibilities regarding equality, diversity and non-discriminatory employment practices. Review all in-house training programmes to ensure equality and diversity aspects are embedded within the content and delivery of the subject matter.</td>
<td>T&amp;D Manager</td>
<td>December 2005</td>
</tr>
<tr>
<td></td>
<td></td>
<td>T&amp;D Manager</td>
<td>October 2006</td>
</tr>
<tr>
<td></td>
<td></td>
<td>T&amp;D Manager</td>
<td>December 2005</td>
</tr>
<tr>
<td></td>
<td></td>
<td>T&amp;D Manager</td>
<td>March 2006</td>
</tr>
<tr>
<td></td>
<td></td>
<td>T&amp;D Manager</td>
<td>Immediate and ongoing</td>
</tr>
</tbody>
</table>
Purpose of the Group

The Diversity & Inclusivity Working Group will support the development of work of the Trust in ensuring it operates as an equal opportunities employer, which recognises and utilises the diversity of its workforce, embracing and developing those skills to provide services for the current and future needs of the communities it serves.

Objectives

The Working Group will:

- Develop a Diversity and Equality Strategy which enables the Trust to:
  1. Retain and develop a workforce representative of the people and communities served by the Trust
  2. Ensure equality of opportunity for staff, ensuring that the Trust benefits from the diversity of culture, skills and experience they bring to the workplace
  3. Obtain a better understanding of the healthcare needs of the individuals and communities served by the Trust
- Monitor compliance with and delivery of the associated action plan of the Trust’s Race Equality Scheme, ensuring it continues to meet legislative requirements
• Develop a Disability Equality Scheme and associated action plan, to ensure that the Trust meets its legislative obligations and applies best practice in all aspects of the Trust's business

• Develop a robust equality impact assessment tool which enables the Trust to assess its policies and functions for any adverse impact in respect of discriminatory practice

• Ensure that Trust policies and procedures meet legislative requirements in relation to being an equal opportunities and pro-diversity employer

• Liaise with other Groups, both internal and external, to share good practice and ensure that equality and diversity is integral to all aspects of our working lives and the services we provide

• Monitor the Trust’s actions and progress to achieve compliance of the Department of Health’s Standards for Better Health, providing assurance to the Trust’s Human Resource Committee

Membership

Membership of the Group will comprise:

Joe Forde Assistant Director of HR – Employment & Policy Devpt
Rachel Vardy HR Manager – General Recruitment & Retention
Jane Lansdowne Therapy Services Manager
Ann Sale Patient Services Manager
Nigel Mellors Staff Side Representative – IWL Lead
David Greatbatch Training & Development Manager
Mr Malkan Consultant Orthopaedic Surgeon
Kathy Frain HR Advisor – Allied Health & Facilities Services
Laura Macarthy Patient & Public Involvement Manager
Liz Cooper Site Manager – Newark Hospital
Melanie Chiverton Nurse Co-ordinator
Tracie Hassall Modernisation Facilitator – MAS
Lynn Hanson Deputy Director – Strategy & Service Improvement
Mike Tasker Corporate Affairs Manager
Michael Hewitt Evaluation, Audit & Research Manager

Frequency of Meetings

It is anticipated that the Group will meet on a quarterly basis

Reporting Structure
The Diversity and Inclusivity Working Group will be accountable to the Trust’s Human Resource Committee