
Oxford University Hospitals NHS Foundation Trust
This report outlines the progress the Oxford University Hospitals NHS Foundation Trust (OUH) has made in Equality, Diversity and Inclusion since the objectives were last set in 2012.

What is Equality, Diversity and Inclusion?

Equality, Diversity and Inclusion are the focus of the Equality Act 2010. This is a legal obligation, which requires NHS Trusts to:

• eliminate unlawful discrimination, harassment and victimisation
• advance equality of opportunity between those who share a characteristic and those who do not
• foster good relations between people who share a protected characteristic and those who do not.
What is the Equality Act?

The Equality Act 2010 prohibits individuals from being discriminated against and victimised on the grounds of their protected characteristics, which are:

- age
- disability
- gender
- race
- marriage and civil partnership
- pregnancy and maternity
- religion and belief
- sexual orientation
- gender reassignment.

The Equality Act also requires Trusts to publish relevant information to prove that they are complying with the Act.
How do we measure our levels of Equality, Diversity and Inclusion?

The OUH uses the NHS Equality Delivery System (EDS2) which helps us to collate data for 4 goals and 18 associated outcomes (see Appendix 1).

We also use the Workforce Race Equality Standard (WRES). This uses ‘workforce indicators’ and associated metrics, against which we must collect and analyse data. We can use this data to make sure our white, black and minority ethnic (BME) staff are treated fairly. This can help us to achieve the EDS2 goals.

Use of both EDS2 and WRES helps the OUH to ensure it complies with the NHS Constitution:

“Patients, public and staff have the right not to be unlawfully discriminated against in the provision of NHS services including on grounds of gender, race, disability, age, sexual orientation, religion, belief, gender reassignment, pregnancy and maternity or marital or civil partnership status.”
What objectives has the OUH achieved since they were set in 2012?

Objective 1 - Provide more accessible communication to patients who have specific communication needs with a focus on language services and patient information leaflets.

The OUH has made progress in several ways:

- We have commissioned 47 languages under the new interpreting contract.
- We have produced 19 Easy Read information leaflets.
- We have implemented the I-care card, to help staff identify carers.
Objective 2 - Improve the patient experience, year on year, for patients across all nine protected characteristics (under the Equality Act 2010) and additional marginalised groups, through feedback obtained from patients and outreach activities.

The OUH has made progress in several ways:

Supporting people with a learning disability:

- We have employed a Learning Disability Liaison Nurse, who overlooks the care of patients with a learning disability. The Liaison Nurse also works with Oxfordshire Family Support Network (OxFSN), to provide information to patients coming into hospital, particularly older patients with a learning disability.

- We are now tracking and flagging patients with a learning disability on the Electronic Patient Record (EPR), so staff can easily see the patient’s needs on their records.

- We have developed a ‘hospital passport’ for patients with learning disabilities to carry, which helps to explain their needs.
Supporting people with dementia:

- We have set up the monthly Dementia Café at the John Radcliffe Hospital. This café is supported by Oxford Museum, Guideposts, Alzheimer’s Society, Age UK and Carers Oxfordshire.

- We have released the ‘Knowing me’ care planning document, in partnership with Oxford Health NHS Foundation Trust and with the help of Age UK and Carers Oxfordshire. This helps carers to be fully involved in ensuring patients with dementia are appropriately supported.

- The Trauma Ward has improved its environment to make it more dementia-friendly, including reminiscence music through iPods and ‘quiet rooms’ with décor designed to stimulate long-term memory.

- We have bought dementia-friendly touch screen computers, which have been uploaded with music and other interactive software.
Advancing multi-faith support:

- The Chaplaincy service has appointed a part-time Muslim chaplain.

- The facilities for Muslim prayers at the John Radcliffe Hospital have been extensively upgraded.

- The chapel and washrooms at the Churchill Hospital have been adapted to help with the requirements of Muslim prayer.

- A multi-faith quiet space has been developed at the Churchill Hospital. This was created by a specialist designer, working with patient representatives of different faiths.

- The Trust’s Bereavement Service continues to be regarded as providing an outstanding service, by the four regional Islamic funeral directors. We have been asked to describe our services to other Trusts, to share good practice.
Supporting trans patients:

- The OUH has produced a trans protocol, to provide guidance on how we can support trans (sexual or gender) patients in hospital.

Objective 3 - Increase awareness of equality and diversity across the Trust.

The OUH has made progress in several ways:

- The OUH has been awarded ‘Partner’ status for 2013/14 as part of the NHS Employers Partners programme.

- We have delivered statutory and mandatory training in Level 1 Equality and Diversity to 84% of all our staff and have also introduced Level 2 Equality and Diversity training sessions. We are continuing to hold these training sessions every month, across all four OUH sites.

- We now carry out an assessment of all Trust policies and procedures prior to implementation, using an Equality Analysis.
- Jobcentre Plus confirmed the award of the ‘two-ticks’ disability symbol employer status for a further 12 months. This recognises commitment to good practice in employing disabled people.

- The Trust actively participates in regional and local equality and diversity networks, which provide the organisation with advice, support and guidance on equality matters.

- The 2014 NHS Staff Survey outcomes show that 63% of those staff completing the survey had undertaken Equality and Diversity training in the last 12 months, which is consistent with the national average for acute trusts.
Objective 4 - Reduce the amount of bullying, harassment or abuse at work experienced by staff from other staff (as reported in the annual Staff Survey).

The OUH has made progress in several ways:

- The Trust now has 32 trained Bullying and Harassment Support Colleagues, who are available to support staff through any instances of bullying that they may not wish, or feel unable, to raise more formally.

- A total of 106 staff have attended training in ‘Addressing Bullying and Harassment’.

- The 2014 Staff Survey outcomes indicate that 22% of staff have experienced bullying or harassment from other staff members, which is slightly lower than the national average of 23%. There was no significant change to this score compared with the 2013 outcomes.
Objective 5 - improve the capture and analysis of workforce and patient information by protected characteristic.

Although the OUH has made progress in this area, we will be carrying out a further review of the quality and frequency of collation of workforce and patient information, following the recent introduction of the Workforce Race Equality Standard (WRES). This will be overseen by the Equality, Diversity and Inclusion Executive Steering Group.
What are our priorities for 2015/16?

The OUH has the following priorities for 2015/16:

- Review and refresh the Trust’s equality and diversity objectives, using the Equality Delivery System (ESD2) public grading panels
- Implement the requirements of the new Workforce Race Equality Standard
- Apply for re-accreditation as a Partner within the NHS Employers Partners programme
- Establish an Equality, Diversity and Inclusion Executive Steering Group, chaired by a Non-Executive Director, in order to increase assurance with respect to equality, diversity and inclusion governance.
The 18 associated outcomes:

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<tr>
<th>The 4 goals:</th>
<th>The 18 associated outcomes:</th>
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<tr>
<td><strong>Better health outcomes</strong></td>
<td>Services are commissioned, procured, designed and delivered to meet the health needs of local communities.</td>
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<td>Individual people’s health needs are assessed and met in appropriate and effective ways.</td>
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<td>Transitions from one service to another, for people on care pathways, are made smoothly with everyone well-informed.</td>
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<td>When people use NHS services their safety is prioritised and they are free from mistakes, mistreatment and abuse.</td>
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<td>Screening, vaccination and other health promotion services reach and benefit all local communities.</td>
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<td>Improved patient access and experience.</td>
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<td><strong>Improved patient access and experience</strong></td>
<td>People, carers and communities can readily access hospital, community health or primary care services and should not be denied access on unreasonable grounds.</td>
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<td>People are informed and supported to be as involved as they wish to be in decisions about their care.</td>
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<td>People report positive experiences of the NHS.</td>
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<td>People’s complaints about services are handled respectfully and efficiently.</td>
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Appendix 1:
EDS2 – Goals and associated outcomes

The 4 goals: The 18 associated outcomes:
A representative and supported workforce

Fair NHS recruitment and selection processes lead to a more representative workforce at all levels.

The NHS is committed to equal pay for work of equal value and expects employers to use equal pay audits to help fulfil their legal obligations.

Training and development opportunities are taken up and positively evaluated by all staff.

When at work, staff are free from abuse, harassment, bullying and violence from any source

Flexible working options are available to all staff consistent with the needs of the service and the way people lead their lives

Staff report positive experiences of their membership of the workforce

Inclusive leadership

Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations

Papers that come before the Board and other major Committees identify equality-related impacts including risks, and say how these risks are to be managed

Middle managers and other line managers support their staff to work in culturally competent ways within a work environment free from discrimination.
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