

LPT Diversity and Inclusion Approach

2017 – 2021



Equality Statement

Leicestershire Partnership NHS Trust (LPT) aims to design and implement policies and practices that meet the diverse needs of our local population and workforce. It is about creating fair and equal access to goods, services, facilities and employment opportunities for all. It is about reducing disadvantage experienced by some groups in comparison to others.

This document takes into account the provisions of the Equality Act 2010 and its general and specific duties, ensuring as far as possible that the Trust eliminates discrimination, advances equality of opportunity and fosters good relationships between different groups of people. Also it ensures that no one receives less favourable treatment on the grounds of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex (gender) or sexual orientation.

In carrying out its functions, the Trust will take into account the different needs of different groups in their area. This applies to all the activities for which LPT is responsible, including strategy and policy development, review and implementation.

Alternative Language Format - Contact Details:

We can provide the information in this document in another format such as in large print, Braille, an alternative language or as an audio version. Please contact Ujala Interpretation and Translation Services on Tel No:
0116 295 4747

Title	LPT Diversity and Inclusion Approach and Action Plan 2017 - 2021
Description	<p>The Diversity and Inclusion Approach and Action Plan 2017 - 2021 outlines the Trust's commitment to equality, diversity, human rights and inclusion.</p> <p>It sets out our approach to addressing health and workplace inequalities. We aim to ensure that mental health, learning disability and community care services are delivered in a fair, equitable, and accessible manner to meet local needs.</p>
Other relevant approved documents	<p>Equality and Diversity Policy Dignity at Work Policy Due Regard Process Transgender Policy</p>
Date of issue	
Review date	2016/17
Prepared by	Sandy Zavery
Due Regard	
Rag Rating	To be commenced
Consultation	
Approved by	
Authorised by	
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1. Introduction

a. NHS England

The NHS England Five Year Forward View¹ outlines the need to put in place more preventative measures and early interventions to improve quality of care and address health inequalities. This will involve developing mechanisms to allow the NHS to engage and build on relationships with service users, patients, carers and staff in order to promote wellbeing and prevent ill-health.

High quality care can only be provided when 'care pathways' meet the needs of those accessing services. Applying a '**one size fits all**' care model will not work.

NHS England, Monitor, the NHS Trust Development Authority, the Care Quality Commission, Health Education England, NICE and Public Health England have national duties laid on them by statute to help local NHS organisations (commissioners and providers) to reduce health inequalities. This depends on staff (clinical and non-clinical) having the right knowledge, skills, experiences, values and behaviours to deliver services that meet the needs of the population served.

b. Leicestershire Partnership NHS Trust

Leicestershire Partnership NHS Trust has a vision to improve the health and wellbeing of the people of Leicester, Leicestershire and Rutland by providing high quality, integrated physical and mental health care pathways. The Trust's 'Five Year Plan' conveys the strategic direction and vision for improving the health and wellbeing of the people of Leicester, Leicestershire and Rutland.

The Trust's pledge, vision and values are aligned to the four strategic objectives; quality, partnership, staff and sustainability.

It is important that the Trust recognises the diverse, changing profile and changing needs of the population that it serves to provide tailored healthcare.

In relation to the Trust's workforce, the revised Diversity and Inclusion Approach 2017 – 2021 is underpinned by the People Strategy (2016/17 – 2020/21) and is especially relevant to 'Strategic Aim 2 - Ensure the Trust has a diverse, skilled, educated and capable workforce'. The Trust aims to build on existing work undertaken by the Equality and Human Rights team to improve quality of care and access to services; leading to improved health outcomes and the reduction of health inequalities.

The Trust's work in the area of equality is fully endorsed and supported by the Executive Team, Trust Board and senior managers.

¹ <https://www.england.nhs.uk/ourwork/futurenhs/> (published October 2014)

c. Legal Obligation

i. Equality Act 2010

The Trust, under the Equality Act 2010 (the Act), has a legal obligation to ensure consistency and protection for people listed under the Act's 'protected characteristics': age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief (including lack of belief), sex (i.e. gender) and sexual orientation.

The Act introduced a new general duty on public bodies in carrying out their functions to have due regard to:

- the need to eliminate discrimination, harassment and victimisation;
- the need to advance equality of opportunity between persons who share a relevant protected characteristic and those who do not;
- the need to foster good relations between people who share a relevant protected characteristic and people who do not.

ii. Due Regard (Equality Analysis)

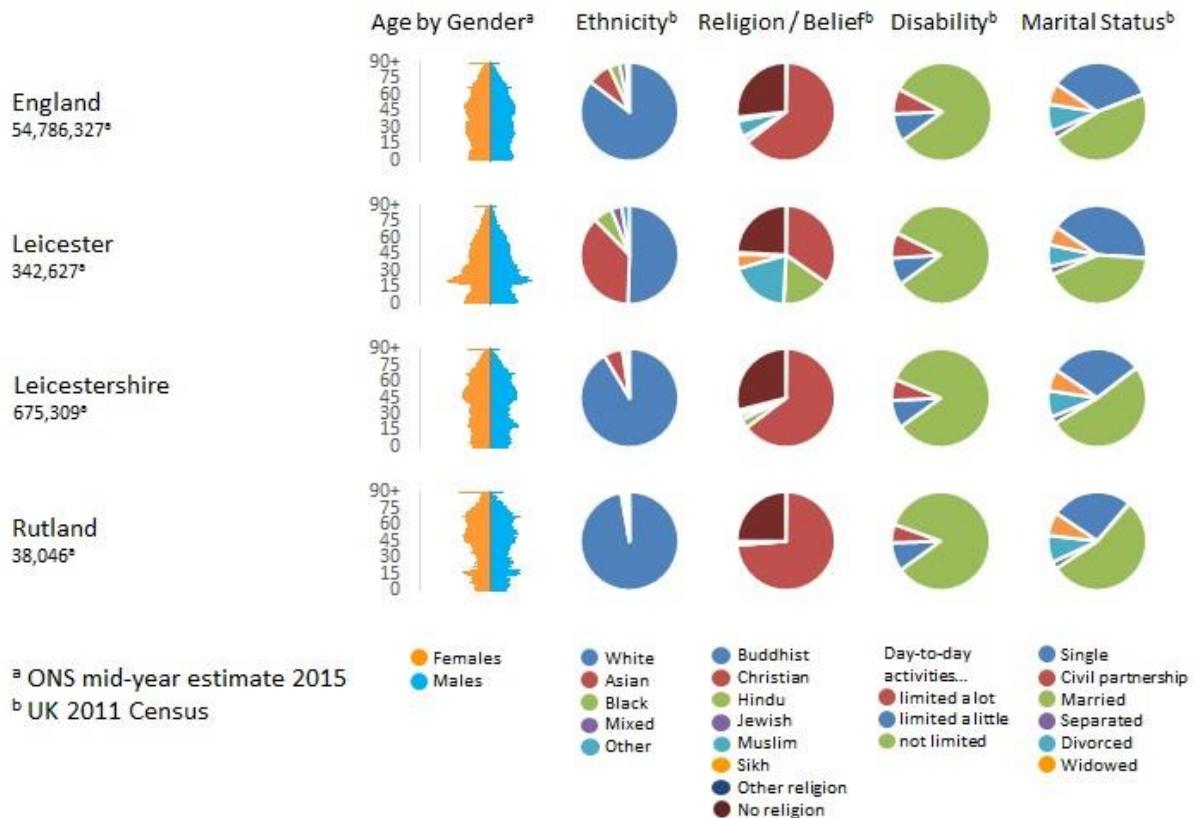
The Act also requires the Trust to have 'Due Regard' to the effects of its policies and practices on its service users and workforce in relation to the protected characteristics covered under the Equality Act.

The Trust's Due Regard process is robust and has been implemented to gather information and mitigate any adverse impact on vulnerable groups. The Due Regard process helps to make fair, sound and transparent decisions based on a detailed understanding of the needs and rights of the groups and individuals affected by the Trust's policies and practices.

2. The Population We Serve

LPT serves a diverse population whose profile varies across Leicester City, Leicestershire County, and Rutland.

Table 1: Population of Leicester, Leicestershire, and Rutland



- **Sexual Orientation:** Information on sexual orientation was available at national and regional level. In 2015 1.8% of the population of England identified as LGB, whilst 1.4% of the population of the East Midlands identified as LGB (Office for National Statistics Annual Population Survey 2015).
- **Transgender:** The Office for National Statistics notes that there are no reliable estimates of the transgender population of England or the UK; work is underway regarding the measurement of gender identity in the 2021 census.

i. Addressing local health inequalities

Serving the diverse population of Leicester, Leicestershire, and Rutland brings about some real challenges for the Trust. These challenges are not just about ensuring patients can access services in an equitable fashion, but also about how we adapt these services to meet the needs of the local community. The Joint Strategic Needs Assessments (JSNAs) for Leicester (2016) and Leicestershire (2015), and Rutland (2015) have identified key issues affecting health in the locality:

- <https://www.leicester.gov.uk/your-council/policies-plans-and-strategies/health-and-social-care/data-reports-information/jsna/jsna-2016/>
- <http://www.lsr-online.org/leicestershire-2015-jsna.html>
- http://www.rutland.gov.uk/health_and_social_care/rutlands_joint_strategic_need.aspx

ii. A diverse, skilled, educated and capable workforce

Having a diverse, skilled, educated and capable workforce that is well supported by the organisation it serves is crucial to delivering effective healthcare that meets the needs of the local population. To help in achieving this goal, equality monitoring of the composition of the workforce is undertaken across a number of areas including levels of pay, occupations, service areas, recruitment and retention, career progression and training, and employee relations. Additionally, staff surveys and equality indicators such as the Workforce Race Equality Standard are analysed in detail. Through these and other means, issues affecting staff are identified and information derived to aid the design of strategies to address these issues.

Table 2: Leicestershire Partnership NHS Trust's substantive workforce at 31st March 2015 by division

Division	n (headcount)	%
Adult Mental Health and Learning Disability Services (AMH&LD)	1404	25.19%
Community Health Services (CHS)	2088	37.46%
Families, Young People and Children's Services (FYPC)	1326	23.79%
Enabling (corporate functions)	548	9.83%
Hosted services (health informatics, audit, and assurance)	208	3.73%
LPT overall	5574	

Table 3: Leicestershire Partnership NHS Trust's substantive workforce at 31st March 2015 by staff group

Staff Group	n (headcount)	%
Additional clinical Services	1230	22.07%
Additional Professional Scientific and Technical*	212	3.80%
Administrative and Clerical**	1297	23.27%
Allied Health Professionals	639	11.46%
Medical and Dental	216	3.88%
Registered Nurses	1980	35.52%
LPT overall	5574	

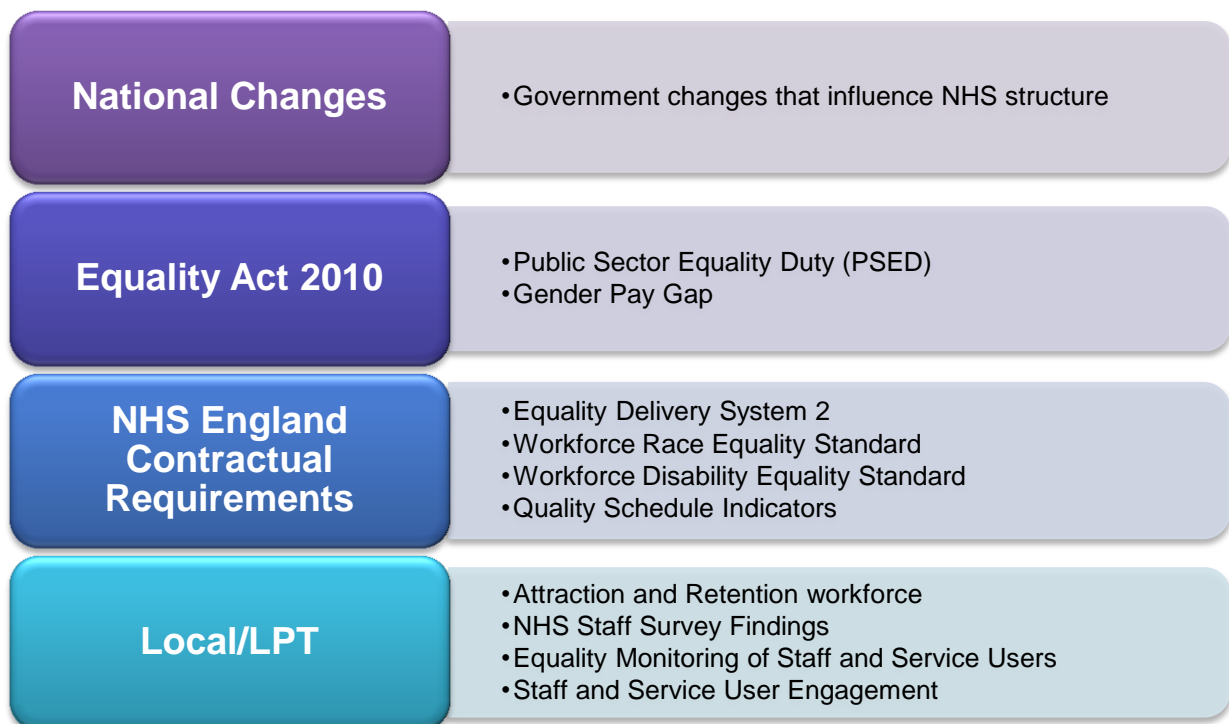
3. Moving Forward

NHS England has placed equality at the forefront of its agenda and recognises the importance that equality plays in addressing the health inequalities experienced by vulnerable groups of people. NHS England also acknowledges and seeks to address the disadvantages faced by staff from some protected, minority groups.

To address the key issues, NHS England has introduced a number of key contractual drivers to help NHS Trusts embed and mainstream equality into everything they do. These key drivers aim to support NHS Trusts in meeting their legal and moral obligations.

Below we summarise the key drivers behind the Diversity and Inclusion Approach, the activities and processes behind the approach, and our equality objectives for the period 2017 to 2021. The equality objectives reflect priorities identified through comprehensive analysis of equality monitoring information on our staff and service users and through engagement with staff and service users, considering all protected characteristics. Necessarily, the objectives focus on protected characteristics and domains where the greatest levels of disadvantage have been identified. However, the objectives and related initiatives should benefit all staff and service users, whilst ensuring that the target groups are included and that any barriers to inclusion are overcome.

a. Key Drivers



b. Key activity:

Activity 1: To comply with the Equality Act 2010 and the Public Sector Equality Duty (PSED).

Activity 2: To report and develop actions to address issues identified in the course of the equality monitoring of workforce and service user data







Activity 3: To embed and mainstream the Equality Delivery System 2 (EDS2) into all service and enabling activity.

Activity 4: To report and develop actions to address gaps identified against the Workforce Race Equality Standard, Workforce Disability Equality Standard, and Gender Pay Gap reporting metrics.

Activity 5: To work in partnership locally, regionally and nationally to share best practice and develop inclusive initiatives that improve outcomes for staff and patients.

Activity 6: To design, develop and deliver training programmes that help staff and managers to foster positive working relationships that lead to quality of care.

c. Key Objectives

<p> 1. Improve the completeness of equality monitoring information held on staff and service users. Target for 20/21 (workforce equality monitoring data)^a:</p> <ul style="list-style-type: none">• levels of non-disclosure to be at or below 10% for each of disability, religion / belief, and sexual orientation.
<p> 2. Improve the uptake of mental health services amongst underrepresented ethnic groups in specified age bands and divisions. Target for 20/21^b:</p> <ul style="list-style-type: none">• in AMH&LD, increase the percentage of service users aged 20 to 59 years old who are Asian British to at least 17.3%;• in FYPC, increase the percentage of service users aged 5 to 19 years old who are Asian British to at least 16.7%.
<p> 3. Improve career development opportunities for BME staff. Target for 20/21^b:</p> <ul style="list-style-type: none">• increase the percentage of BME staff at non-clinical Very Senior Management level (Band 8b and above) to at least 14.6%. <p>Target for 20/21^b:</p> <ul style="list-style-type: none">• increase the percentage of Black British staff in higher unqualified and qualified clinical pay bands to at least:<ul style="list-style-type: none">○ unqualified: Band 3: 3.5%, Band 4: 2.2%;○ qualified: Band 6: 5.0%, Band 7: 4.1%.
<p> 4. Improve career development opportunities for women. Target for 20/21^b:</p> <ul style="list-style-type: none">• increase the percentage of female staff at middle to higher levels in non-clinical, Administrative and Clerical roles to at least: Band 6: 70.8%, Band 7: 71.2%, Band 8a: 68.9%, Band 8b and above: 70.7%;• increase the percentage of female staff at Very Senior Management level in clinical roles to at least 66.7%.<ul style="list-style-type: none">• Develop an IQPR in relation to fostering greater equity in recruitment and selection process.
<p> 5. Reduce the percentage of staff from minority groups experiencing bullying and harassment from other staff in the Trust. Target for 20/21^c:</p> <ul style="list-style-type: none">• reduce percentage of disabled staff reporting bullying and harassment from a manager;• reduce percentage of disabled staff reporting bullying and harassment from other staff;• reduce percentage of Black British staff reporting bullying and harassment from other staff;• reduce percentage of staff who are LGBT reporting bullying and harassment from other staff.
<p> 6. Improve BME representation at Board level. Target for 20/21^a:</p> <ul style="list-style-type: none">• increase BME representation amongst voting members of the board to at least 20%

^a based on data held in the Electronic Staff Record

^b based on data held in patient information system

^c based on the NHS Staff Survey

The target for Objective 1 will help to bring the completeness of equality monitoring information held on staff and service users to a level that will support more robust analysis.

The targets for Objectives 2 to 5 reflect the threshold at which proportional representation would be achieved.

The target for Objective 6 will bring BME representation on the Board in line with BME representation in the workforce overall.

4. Engagement with staff and service users

The Trust is committed to providing high quality Mental Health, Learning Disabilities and Community Health Services. One way to identify and to begin to address areas where this commitment is not being realised is to receive feedback from staff and service users on their experiences. Equally, feedback on positive experiences can help to identify areas of good practice that might be built upon further and replicated elsewhere.

Staff and members of the public who have had poor experiences at the Trust are encouraged to inform the Trust through our complaints processes or by contacting the newly appointed 'Guardian' of the Trust. Similarly, good experiences can be highlighted by recording a compliment.

We will use a variety of initiatives to engage with staff and service users including "listening into action" events, stakeholder and partnership events, social media, support groups, the trust membership scheme—to name a few.

5. Conclusion






The Trust has worked over the past three years to mainstream and embed the Equality and Human Rights agenda into services and employment practices and to address health inequalities.

However, the Trust recognises that it still has much to do before it can truly demonstrate success in dealing with stigma, perceptions and barriers faced by vulnerable groups in the community. Indeed, tackling health inequalities is an ongoing endeavour that will take many generations.

The Trust will build on the work progressed so far. The actions implemented aim to address socio-economic deprivation and inequality in services and employment practices.

The foundation has been laid but further work is needed to make that all important difference in the community; cultivating a healthier society in Leicester, Leicestershire and Rutland.

Diversity and Inclusion Action Plan 2017 – 2021

Activity 1: To comply with the Equality Act 2010 and the Public Sector Equality Duty (PSED).			
No	Objectives	Progress	Rag Rating
1	 To analyse, report and publish equality monitoring information on staff and patients ensuring we meet the PSED criteria and have Due Regard to eliminating discrimination, advancing equality of opportunity and fostering good relations.		
2	 To analyse, report and publish staff information on Gender Pay Gap to comply with the government's 2017 amendment to the Equality Act 2010;		
3	 To report and publish our progress in the Annual Diversity and Inclusion Report.		
4	 To report against the Quality Schedule bi-annually to commissioners outlining progress made against the Diversity and Inclusion agenda.		
Activity 2: To report and develop actions to address gaps identified against the Workforce Data and Service User Data.			
No	Objectives	Progress	Rag Rating
5	 Improve the completeness of equality monitoring information held on staff and service users. Target for the end of 20/21 (workforce equality monitoring data): • levels of non-disclosure to be at or below 10% for each of disability, religion / belief, and sexual orientation.		

Activity 3: To embed and mainstream the Equality Delivery System 2 (EDS2) into all service and enabling activity.

No	Objectives	Progress	Rag Rating
6	<ul style="list-style-type: none"> ■ To improve our grading against the Equality Delivery System 2 (EDS2) standard. Target for 20/21: <ul style="list-style-type: none"> • Improve position to ‘Achieving – Green’ against all 4 Goals and 18 outcomes. 		
7	<ul style="list-style-type: none"> ■ Staff engagement through a number of initiatives that improves staff health and wellbeing. 		

Activity 4: To report and develop actions to address gaps identified against the Workforce Race Equality Standard, Workforce Disability Equality Standard, Gender Pay Gap, and wider workforce equality monitoring.

No	Objectives	Progress	Rag Rating
8	<ul style="list-style-type: none"> ■ Improve career development opportunities for BME staff. Target for 20/21: <ul style="list-style-type: none"> • increase the percentage of BME staff at non-clinical Very Senior Management level (Band 8b and above) to at least 14.61%. ■ Improve career development opportunities for women. Target for 20/21: <ul style="list-style-type: none"> • increase the percentage of Black British staff in higher unqualified and qualified clinical pay bands to at least: <ul style="list-style-type: none"> ○ unqualified: Band 3: 3.5%, Band 4: 2.2%; ○ qualified: Band 6: 5.0%, Band 7: 4.1%. • increase the percentage of female staff at middle to higher levels in non-clinical, Administrative and Clerical roles to at least: Band 6: 70.8%, Band 7: 71.2%, Band 8a: 68.9%, Band 8b and above: 70.7%; • increase the percentage of female staff at Very Senior Management level in clinical roles to at least 66.7%. 		
9	<ul style="list-style-type: none"> ■ Improve BME representation at Board level. Target for 20/21: <ul style="list-style-type: none"> • increase BME representation amongst voting members of the board to at least 20% (two of ten) 		

Activity 5: To work in partnership locally, regionally and nationally to share best practice and develop inclusive initiatives that improve staff and patients outcomes.

No	Objectives	Progress	Rag Rating
10	<ul style="list-style-type: none"> ■ Improve the uptake of mental health services amongst underrepresented ethnic groups in specified age bands and divisions. Target for the end of 20/21: <ul style="list-style-type: none"> • in AMH&LD, increase the percentage of service users aged 20 to 59 years old who are Asian British to at least 17.5%; • in FYPC, increase the percentage of service users aged 5 to 19 years old who are Asian British to at least 16.7%. 		
11	<ul style="list-style-type: none"> ■ Improve partnership working across different sectors to improve engagement with communities. 		
12	<ul style="list-style-type: none"> ■ Development of outreach initiatives that enhance sustainability in the community through the application of funding bids. 		
13	<ul style="list-style-type: none"> ■ Engagement in projects that improve employment opportunities for diverse groups. 		

Activity 6: To design, develop and deliver training programmes that help staff and managers to deal with issues and support positive working relationships that lead to quality of care.

No	Objectives	Progress	Rag Rating
14	<ul style="list-style-type: none"> ■ Reduce the percentage of staff from minority groups experiencing bullying and harassment from other staff in the Trust. Target for 20/21: <ul style="list-style-type: none"> • reduce percentage of disabled staff reporting bullying and harassment from a manager; • reduce percentage of disabled staff reporting bullying and harassment from other staff; • reduce percentage of Black British staff reporting bullying and harassment from other staff; • reduce percentage of staff who are LGBT reporting bullying and harassment from other staff. 		
15	<ul style="list-style-type: none"> ■ Design, develop and deliver training modules that embed the Trust values of Trust, Compassion, Respect and Integrity agenda. 		

Rag Rating

Blue	To be commenced
Red	Not on target
Amber	Progressing
Green	Completed