

Public Sector Equality Duty (PSED) compliance report and Outcome of Equality Delivery System Grading – 2017/18

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Title:	Public Sector Equality Duty (PSED) compliance report and outcome of Equality Delivery System Grading – 2017/18
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Summary of report:

- The Trust is required to comply with both the general duties and the specific duties of the PSED and is mandated to publish the results of exercises in relation to the EDS2
- The purpose of this report is to provide assurance of compliance with the Public Sector Equality Duty (PSED) for the year 2017/18 and provide the outcome of a partial grading exercise in relation to the NHS Equality Delivery System 2 (EDS2) which completed in March 2018.
- The report highlights areas of progress over the past year as well as acknowledging challenges for the future.
- Trust compliance with the general duties is given in the form of some narrative regarding key pieces of project work, as detailed in this report. Following this, data is published on workforce and service users/carers as part of the Trust's compliance with the specific duties
- The EDS2 reporting is given in the form of grades in comparison to our previous grading. All EDS2 grading is required to be completed by Trust stakeholders (rather than self –assessed) based on evidence supplied
- The Trust is required to publish one or more equality objectives covering a four year period, in the context of the EDS2. These were last set in 2016 and will be reviewed in the context of the new Trust Equality, Diversity & Inclusion plan which is currently out to public consultation until 16th March 2018.

Equality & Diversity /Service User & Carer Involvement implications.:

This paper shows compliance with the PSED and the EDS2 which both contribute to meeting legal responsibilities under the Equality Act 2010. Service user and carer representatives were involved in the re-grade of the EDS2 alongside a range of other stakeholders.

Seen by the following committee(s) on date:

- **Quality & Risk Management Committee (QRMC)** – 26th February 2018.
- **Integrated Governance Committee (IGC)** – 6th March 2018.
- **Trust Executive Team** – 7th March 2018.
- **Trust Board** – 22nd March 2018 (APPROVED FOR PUBLICATION)

Contact:

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Public Sector Equality Duty (PSED) compliance report and outcome of Equality Delivery System 2 Grading – 2017/18

1. Introduction/Executive Summary

- 1.1 The purpose of this report is to provide assurance of compliance with the Public Sector Equality Duty (PSED) for the year 2017/18 for Hertfordshire Partnership University NHS Foundation Trust (the Trust) as well as the outcome of a partial regrading that has taken place with stakeholders around the NHS Equality Delivery System 2.
- 1.2 The PSED requires the Trust to ensure that **ALL** of its functions are carried out in a way that does not disadvantage anyone from a protected group. This is part of the Trust's overall compliance with the Equality Act 2010.
- 1.3 The EDS2 is a tool used by NHS providers to focus on one or more areas/functions of compliance annually to track improvements to services and employment.
- 1.4 The Trust is required to comply with both the general duties and the specific duties of the PSED given the size of the organisation. The EDS2 is a mandated part of the NHS standard contract for providers.
- 1.5 Sections 2 and 3 provide an overview of PSED compliance followed by section 4 which provides an overview of EDS2 compliance.
- 1.6 A summary of past year's activities, that have contributed to both PSED and EDS2 compliance, include:
 - Further implementation of organisational values
 - Evaluating the bullying & harassment pledge
 - Development and implementation of Sexual Orientation and Gender Identity guides for CAMHS services
 - Further implementation of mandatory staff training programme for equalities
 - Coproduction of Equality, Diversity and Inclusion plan for 2018 - 2022
 - Equality Delivery System 2 (EDS2) involvement with local stakeholders in 2017
 - Review of Trust diversity role models programme
 - Further implementation of contractual obligations regarding EDS2 and WRES
 - Full implementation of recommendations made to support our six staff networks, strengthening role of executive sponsors
 - Implementing new policy and launching new strategy regarding Spiritual Care Services.
 - Partial regrading of EDS2 and beginning review of four year objectives set in 2016.
- 1.7 Challenges from the past year have included:
 - Identifying resources to improve metrics of the WRES and prepare for the introduction of WDES and SOIS
 - Reducing the gaps in equality monitoring data for staff, service users and carers.
 - The need for a more systematic approach to storing and cataloguing EDS2 evidence for stakeholders.
- 1.8 Compliance with the general duty is given in the form of some narrative regarding key pieces of project work, as detailed in this report). Following this, data has been published on workforce as part of Trust compliance with the specific duties.
- 1.9 Compliance with the EDS2 is given in the form of a partial regrading shown in comparison the Trust previous grading.

1.10 Appendix 2 provides an overview of the Trust's requirements in relation to the Public Sector Equality Duty and requirements under the EDS2.

2. PSED - Summary of Key Performance Areas regarding General Duties

The general duty of the PSED requires the Trust, in relation to all protected groups¹, to ensure it is working to:

- **Eliminate unlawful discrimination**, harassment, victimisation and any other conduct prohibited by the Equality Act 2010
- **Advance equality of opportunity** between people who share a protected characteristic and people who do not share it
- **Foster good relations** between people who share a protected characteristic and people who do not share it.

2.1 Overview/narrative to eliminate unlawful discrimination

2.1.1 *The Trust's organisational Values.* The Trust has continued to embed its values in the organisation. All staff receive an annual values based appraisal to ensure staff reflect on their behaviours, identifying areas for improvement in themselves and others. The past year has seen 91% of values based appraisals completed. The Trust has focused on more promotion of the values, through promotional campaigns.. One of these was around the flu jab and staff from across our geographical areas was part of the Trust wide video which included staff who are members of Trust staff networks and also members of staff that are Trust diversity role models increasing the visibility of our demography.

2.1.2 *Anti-Bullying & Harassment Pledge.* The Trust launched an Anti-Bullying and Harassment Pledge in October 2016. On reflection of staff survey results, including NHS and Internal surveys around bullying and harassment, the pledge has had some impact but evidence suggest this is not breaking down systemic barriers within the organisation as had been hoped. To support this, the Trust has now included a message from each Diversity Role model about supporting someone who is experiencing bullying and harassment. In addition, our Freedom to Speak Up guardian has been offering open sessions encouraging staff to talk about their experiences and to approach for support.

2.1.3 *NHS WRES.* The Trust has implemented a WRES action plan focusing on identifying and address the inequalities within the Trust. The WRES data can be found on the public website.² The 2017 data showed a significant improvement between BME and non-BME staff in relation to recruitment and targeted work, narrowing the gap in relation to staff appointed following shortlisting. The 2017 figures indicate an improvement in the past year. The Trust is now performing above the national average. Work will be needed to recognise the barriers around the disciplinary process, as this is an area identified for the Trust for further improvement.

There remains some challenge for the Trust with WRES which has resulted in refreshing its annual work-plan to ensure that this is focused on making measurable improvements. The Trust's WRES data and work plan can be found online at <http://www.hpft.nhs.uk/about-us/equality-and-diversity/nhs-workforce-race-equality-standard/>

2.1.4 *New Equality Plan development.* The Trust has coproduced a draft of the new Trust Equality, Diversity and Inclusion plan, aiming for the final document to be ratified in April 2018 and for the

¹ Age, Disability, Gender identity/reassignment, Pregnancy and maternity (employment only), Race/Ethnicity, Religion/Beliefs, Sex (gender), Sexual orientation, Marriage & Civil Partnership (employment only)

² <http://www.hpft.nhs.uk/about-us/equality-and-diversity/wres/>

action plan to follow clearly setting out the Trust's Equality objectives. At the time of publishing this report, the draft plan was open for public consultation.

- 2.1.5 *Reviewing the Equality Impact Assessment process to be more inclusive of staff, carers and service users.* Identifying the positive and negative implications to changing service provision and developing a stronger quality.

2.2 Overview/narrative to advancing equality of opportunity

- 2.2.1 *Diversity Role Models.* The Trust's Diversity Role Models launched in February 2016 and was internally reviewed in July 2017. The recommendation was to enhance the programme and advance the opportunity for staff to be involved and engaged. The programme engages staff who are BME, LGBT, Women, Carers or have a Disability in being role models and to support people from similar backgrounds. This has now been expanded to include Mental Health role models and Spiritual care role models and is adding another layer of support for staff and helping staff identify allies³ in the workforce.
- 2.2.2 *Stonewall Diversity Champions.* The Trust continues as a member of the Stonewall Diversity Champions programme and is passionate about focusing on the needs of LGBT staff, service users and carers. In relation to this, throughout 2016 the Trust was listed as one of the Stonewall top 100 employers in England for LGBT staff. The Trust did not achieve a top 100 placement for the 2018 index (launched January 2018) however a vast improvement has been noted on the Trust's placing since 2017, climbing 82 places in the index. Over the next year, the Trust will invest time in focusing on LGBT community engagement and aiming for a top 100 placement in the index for 2019.
- 2.2.3 *Staff Networks.* There has been improvement of the Trust's staff networks to incorporate its Vision for what it wants to achieve "Delivering Great Care, Achieving Great Outcomes - Together". The six staff networks supporting staff from a range of backgrounds.⁴ are expected to set annual objectives based around the Trust's *Good to Great* strategy.
- 2.2.4 *Implementation of Sexual Orientation and Gender Identity CAMHS guide.* This piece of work focused on developing a new guidance for clinicians in relation to talking about sexual orientation and gender identity. It was developed in partnership with Anna Freud Centre⁵ and CYP IAPT Collaborative and had an official launch in May 2017, the Trust's annual International Day Against Homophobia, Biphobia & Transphobia (IDAHOBIT) conference. Further work is being undertaken with CAMHS staff to continue to utilise this resource. The resource is available to view online at <https://cypiapt.com/2017/04/03/so-and-gi-guide/>

2.3 Overview/narrative to foster good relations

- 2.3.1 *International Women's Day (IWD) Programme.* In March 2017, the Trust hosted its annual IWD conference and focused on the given theme Be Bold for Change; Good to Great - Realising Your Full Potential. There were a range of professionals that spoke about their personal journeys as well as a variety of workshops focusing on self-development or signposting. The whole programme was rated as either great or good by attendees, with the recommendation to focus on intersectionality for IWD 2018. This means to explore the relationship between the protected characteristics and the multiple impact that they can have. Since the event, the Trust has two male allies that have become members of the network to foster good relations and highlight shared experiences.

³ Allies are broadly defined as people from a different background to a group they are speaking on behalf of. E.g. male allies supporting work around equality for women.

⁴ BME Network, Outlook (LGBT), Women's Network, Disability Network, Carers Network, MH Network

⁵ National Centre for Children and Families

- 2.3.2 *International Day Against Homophobia, Biphobia & Transphobia (IDAHOBIT)*. The Trust delivered its annual event in May 2017. The theme chosen was Families and “The voice of parents”.

The Trust worked in collaboration with the University of Hertfordshire and delivered a workshop full of rich experiences highlighting some of the key issues for anyone that is grappling with their sexual orientation and/or gender identity and available support that is available locally. This was also evidenced by research and a tool kit was launched to aid professional development, including hearing from inspiring community champions highlighting their personal experiences. The keynote speaker is fostering good relations with the Trust and HCC and third sector providers to highlight the experiences of families and the voice of parents.

- 2.3.3 *Equality diversity and human rights week*. The Trust held several events and had staff networks and diversity role models involved in highlighting the programme. Two of these events focused on dementia and were promoted through the Trust’s library service, with attendees from other NHS providers, the Clinical Commissioning Groups (CCG), University of Hertfordshire, HCC and third sector partners. The event was well attended with lots of speakers and workshops. The evaluation showed that attendees really enjoyed the different programmes and got the chance to build relationships and network whilst highlighting pertinent issues.

- 2.3.4 *Carer Week Conference & Carer Rights Day*. The Trust hosted their annual conference for Carers Week in June 2017 as well as ‘An event for carers’ in November 2017 for Carers rights day. Both events were extremely popular with carers and professionals. For carers, there was an opportunity to hear speakers followed by a range of alternative therapies for carers. Important points from the day included carer” ongoing need to be engaged fully in the Trust and ensuring more support is offered to be able to continue with Caring responsibilities. Further work needs to be done to help substantive staff talk about also being a Carer and to understand the choices available to them.

- 2.3.5 In October 2017, the Trust hosted its third local WRES annual workforce conference with Unison and NHS England focused on ‘Diversity & Leadership - Why it matters to you?’ which emphasised on ways the Trust can improve its approach to race equality and the retention and promotion of BME staff. The event was well attended with a number of Service Line Leads and Executive Directors who pledged to undertake more work around the WRES in their Strategic Business Unit (SBU).

3. PSED - Specific Duties

3.1 Overview of requirements

- 3.1.1 The Trust is required to comply with the specific duties in the following ways:

- Publish information to demonstrate compliance with the general duty
- Publish data on the make-up of the workforce
- Publish data on those affected by Trust policies and procedures
- Publish one or more equality objectives.

- 3.1.2 Publish information to demonstrate compliance with the general duty – this report has been written and published to ensure compliance with this element of the duty.

- 3.1.3 Publish data on the make-up of the workforce – this is provided in Appendix 1

- 3.1.4 Publish data on those affected by Trust policies and procedures – this is provided in Appendix 1 (service user and carers)

- 3.1.5 Publish one or more equality objectives spanning a four year period – The Trust’s Equality Objectives were published in June 2016 as part of our EDS2 compliance reporting and are detailed in section 4.

3.2 Observations against our data

Appendix 1 details data for employment and for service provision by protected group. The following observations have been made from this along with our WRES data – available at <http://www.hpft.nhs.uk/about-us/equality-and-diversity/nhs-workforce-race-equality-standard/>

- 3.2.1 The Trust has a good quality of data across ethnicity, gender and age. However there remain some gaps in data across sexual orientation, disability and religion/belief with larger numbers of people declining to give this information. This is already an area of action for the Trust and improvements are beginning to be seen – particularly in relation to employee data.
- 3.2.2 The Trust's WRES data shows improvements have been in the experience of BME applicants being appointed following shortlisting. As detailed earlier in this report the Trust is focusing additional action on how to see the same improvement where disciplinarys are concerned.
- 3.2.3 Over 25% of our carers are aged over 65. Supporting an ageing population for carers is an area of focus for the Trust and development of contingency planning processes continues to ensure risk is minimised for carer and service user.
- 3.2.4 6% of applicants disclose a disability, yet only 3% of the appointed workforce have disclosed a disability (for the latter, there is a large number (18%) of staff who choose not to disclose). The Trust disability network is reviewing actions for addressing this as part of the Trust Disabled Confident Employer membership.
- 3.2.5 34% of employees are from an ethnic minority background (where those who did not state their ethnicity are removed from figures). This is not currently reflected evenly across the workforce which is a key evidence base for the WRES having been implemented. However over the past year, the Trust has begun to see some movement in band 5 BME staff moving into band 6 roles (in line with national trends since the WRES was implemented).

4. EDS2 – partial regrading of activity

- 4.1 The EDS2 requires providers to select one or more EDS2 outcomes to re-assess on an annual basis.
- 4.2 EDS2 grades should be agreed by the Trust's 'local interests' (stakeholders) through the provision of range of evidence showing the Trust current position.
- 4.3 The EDS2 has four grading options:
 - **Red** – Under-developed (I.e. no evidence of activity for protected groups)
 - **Amber** – Developing (I.e. evidence of activity (often good) but not for all protected groups)
 - **Green** – Developed (I.e. good evidence of activity for most protected groups)
 - **Purple** – Excelling (I.e. good evidence of activity for all protected groups).
- 4.4 The Trust chose to re-grade six outcomes graded as either 'developing' or 'excelling' in the previous grading exercise. One 'excelling' outcome was not re-graded as this relates to topics that are actively being discussed by the Trust staff mental health and disability networks (outcome 3.5) and therefore it was felt that assessment of this outcome should be linked to this work.
- 4.5 Table 1 overleaf shows the results of those EDS2 objectives that were regraded against the previous grading.

Goal	Outcome	June 2016	January 2018
1. Better health outcomes	1.1 Services are commissioned, procured, designed and delivered to meet the health needs of local communities.		
	1.2 Individual patients' health needs are assessed, and resulting services provided, in appropriate and effective ways		
	1.3 Transitions from one service to another, for people on care pathways, are made smoothly with everyone well informed.		
	1.4 When people use NHS services their safety is prioritised and they are free from mistakes, mistreatment and abuse.		
	1.5 Screening, vaccination and other health promotion services reach and benefit all local communities.	Not Graded	
2. Improved patient access and experience	2.1 Patients, carers and communities can readily access services, and should not be denied access on unreasonable grounds		
	2.2 People are informed and supported to be as involved as they wish to be in decisions about their care.		
	2.3 People report positive experiences of the NHS.		
	2.4 People's complaints about services are handled respectfully and efficiently.		
3. Empowered, engaged and well-supported staff	3.1 Fair NHS recruitment and selection processes lead to a more representative workforce at all levels.		
	3.2 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.	Not Graded	
	3.3 Training and development opportunities are taken up and positively evaluated by all staff.		
	3.4 When at work, staff are free from abuse, harassment, bullying and violence from any source.		
	3.5 Flexible working options are made available to all staff, consistent with the needs of the service, and the way that people lead their lives.		
	3.6 Staff report positive experiences of their membership of the workforce.		
4. Inclusive leadership	4.1 Boards and senior leaders conduct and plan their business so that equality is advanced, and good relations fostered, within their organisations and beyond		
	4.2 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.		
	4.3 Middle managers and other line managers support their staff to work in culturally competent ways within a work environment free from discrimination.		

Table 1: HPFT EDS2 partial re-grading outcome (2018)

4.6 Observations from re-grading

- Outcome 1.2 has declined in quality but still rated as 'good'. This indicates we are lacking evidence that shows how we are achieving this for all service user and carer groups. There are some challenges in ensuring that we have a full data set of demography for people using our services which already forms part of our equality objectives set during our last grading.
- Outcome 1.3 has maintained a position of developing – this is consistent with the current Trust position around transitions between services, however there is currently a more targeted approach in the Trust to addressing issues around transition
- Outcome 2.3 has maintained its position based on feedback we receive through our Having Your Say and Friends & Family Test feedback
- Outcome 3.1 has improved – largely in response to changes that have been made to the Trust recruitment process over the past 18 months and improve reporting of equalities data
- Outcome 3.4 has not improved its position which is consistent with feedback from staff through the Trust staff survey
- Outcome 4.3 shows that further improvement is needed re: skilling up middle managers to work in cultural competent ways
- Outcome 3.2 relates to equal pay and was not graded as the Trust is due to publish details of its gender pay gap by April 2018 (in line with national requirements). Therefore this piece of work will take place later in 2018.

It should be noted that the Trust has considerably improved its data quality around a number of equalities areas over the past 18 months therefore more accurate reporting may be providing a truer picture of the Trust position. It is also important to note that an amber grade implies that good work is happening, but that this does not yet have enough breadth to be considered as a high performing area.

4.7 EDS2 objectives

The PSED (and EDS2) encourage organisations to publish one or more equality objectives covering a four year period. These were last revised in June 2016 and are currently being reviewed in the context of new Trust Equality Plan (currently out to public consultation to 16th March 2018). Our objectives currently set are:

- 4.7.1 Project focused on improvement in the quality of data that more clearly shows information on care planning by protected groups
- 4.7.2 Improve the data quality dashboard for patient safety to ensure that demography is scrutinised in relation to service users response to the question 'is the service a safe environment'
- 4.7.3 Equity audit carried out which looks at initial access to services through SPA (or other routes) that maps different groups against each other Having Your Say data is scrutinised on a quarterly basis to identify any patterns or trends in relation to the demography of respondents and what they are saying about Trust services (and included in SBU reports)
- 4.7.4 A targeted action plan for the Workforce Race Equality Standard works to proactively decrease the negative experiences of BME staff when compared to white staff in relation to aspects such as recruitment, disciplinary procedures and bullying and harassment
- 4.7.5 Unconscious bias training is rolled out to the entire Trust workforce to ensure some scrutiny of individual behaviours, actions and a general awareness of how to reduce inequality
- 4.7.6 A project takes place to scrutinise the impact of abuse from service users and relatives toward staff as this features high in the staff survey, and understand which (if any) groups may receive disproportionate abuse
- 4.7.7 The senior board champions for Equality are visible in speaking about equalities and challenging inequality within the Trust and local health economy
- 4.7.8 The Trust's collective leadership programme includes core components of equality & diversity that support in developing culture change in the way people work.

5. Challenges & Opportunities for the coming year

- 5.1 As the equality programme increases in size, there is an ongoing pressure to ensure that every part of the service is contributing to take necessary action to prevent, reduce and eliminate inequalities. As a mental health and learning disability service provider, the Trust are aware there is an ongoing need to improve its approaches around intersectionality⁶ to ensure that it identifies the needs of the whole person so that agreement can be made together with individuals the best possible course of action/opportunity for them – whether that be in relation to service provision or employment.
- 5.2 The WRES has also presented some challenges in the past year. Whilst an improvement in figures is noted, the gap to show less disproportionality between BME and White staff in relation to staff disciplinary, the same cannot be said for staff who are appointed following shortlisting. For 2018, there will be further analytical work to look at shortlisting and to build robust evidence around this to ensure the Trust can make the changes needed to make the process fairer and promote equality of opportunity.
- 5.3 Information and Equality Standards - April 2018 will see the reporting of the standards for SOIS, WDES. In addition, the publication of reporting on any Gender Pay Gap. In relation to these we need to look at effective work plans to implement and delivery targets on the above with being aware of the limitations to resources.
- 5.4 In relation to service provision our ongoing challenge is around monitoring of demographic data. The Trust sees significant gaps in data regarding sexual orientation and disability. Therefore this is an area of focus over the coming year. We also see this for employment data and actions will be set to address this. With regards to service provision, the Trust is developing a new reporting mechanism to allow teams to see, in real time, data that may be missing from service user records so local action can be agreed.
- 5.5 Whilst the Trust has reviewed both our equality training package, the next year will see additional training being rolled out across the Trust through an unconscious bias train the trainer programme and will evaluate its effectiveness.

6. Conclusion

- 6.1 This report has provided a summary overview of progress against key parts of the Public Sector Equality Duty whilst recognising areas for development and challenges for the organisation. Additionally this has included a partial review of the EDS2 in line with contractual requirements.
- 6.2 Whilst there have been a number of areas of good practice to celebrate, there remains an improvement needed around some of the more simple structures of the organisation in relation to equality monitoring, initial recruitment and also retention as well as increasing understand the voices of staff, service users and carers in relation to different protected groups.
- 6.3 The EDS2 re-grading has shown that there is still action to be taken in order to get more traction in areas of service accessibility and transitions between different services. In relation to staffing it is expected that programmes of work such as WRES, Disability Confident and Stonewall Diversity Champions will begin to see a positive change in the experiences of staff from protected groups.
- 6.4 In producing this report, and the activities detailed within, it is felt there are no substantial areas where the Trust is failing in its duty to comply within the Equality Act 2010, whilst acknowledging that there are areas for improvement in raising the standard of equity for some protected groups. In April 2018 the Trust will publish a new Equality, Diversity & Inclusion Plan for the next four years. At this time, this report will be refreshed to ensure that PSED reporting is brought in line with reporting on the overall Trust's Equality plan as well as reviewing EDS2 objectives.

⁶ The interconnected nature of social categorisations such as race, sexuality, and gender as they apply to a given individual or group. Also termed dual or multiple identity.

7. Contact

Any further information needed on the contents of this report can be obtained from the Trust Equality & Diversity Department within the Inclusion & Engagement Team on equality@hpft.nhs.uk.

Appendix 1 – Workforce & Service User/Carer Data

Data tables for staff and service user equalities data, 01/01/17 – 31/12/17. The % listed in the tables relates the following numbers:

Applicants	7,326
Staff in Post	3,662
Leavers	514
Service Users/Carers (open referrals during year)	46,792

AGE

	Applicants	Employed staff	Leavers	% of Professional Development Plans completed
17-19	1.09%	0.73%	1%	100%
20 - 24	21.12%	5.6%	11.5%	85.7%
25 - 29	20.79%	8.21%	12.6%	91.9%
30 - 34	14.51%	9.2%	7.1%	86.5%
35 - 39	10.44%	11.2%	11.3%	88.3%
40 - 44	9.08%	13.8%	8.7%	90.4%
45 - 49	8.68%	14.58%	8.5%	90.8%
50 - 54	7.63%	14.61%	13.6%	91%
55 - 59	4.79%	11.25%	11.4%	91.6%
60-64	1.54%	7.15%	9.4%	91.3%
65-70	0.19%	2.67%	4.1%	89.5%
71-75		1%	0.8%	92.85%
76-80		-	-	-
81-85		-	-	-

	Service Users	Carers
Under 16	14%	0.5%
16/18	5%	0.1%
18/24	13%	2.3%
25/34	15%	7.3%
35/44	12%	12%
45/54	11%	24.4%
55/64	8%	26.9%
65/74	6%	15.9%
75/84	9%	5.9%
85+	8%	1.1%
Age Unknown	0%	4.1 %

GENDER

	Applicants	Employed staff	Leavers	% of Professional Development Plans completed	Service users	Carers
Male	21.74%	27.65%	25.49%	92.2%	45.9%	66.8%
Female	77.6%	72.35%	74.51%	89.3%	54%	30.4%
Unknown	0.66%	-	-	-	5.12%	2.7%

ETHNICITY

	Applicants	Employed staff	Leavers	% of Professional Development Plans completed	Service users	Carers
White - British	47.55%	50.46%	52.5%	90.4%	64.5%	31.2%
White - Irish	1.67%	2.67%	2.7%	86.4%	1.2%	1.1%
White - Any Other White Background	10.64%	7.21%	9.1%	90.4%	3.3%	1.6%
Asian Or Asian British - Indian	7.87%	4.55%	4.7%	84.1%	0.78%	0.9%
Asian Or Asian British - Pakistani	3.08%	1.4%	1.5%	82%	0.52%	0.4%
Asian Or Asian British - Bangladeshi	1.44%	0.39%	0.77%	100%	0.2%	0.5%
Asian Or Asian British - Any Other Asian Background	2.86%	4.64%	4.07%	94%	1.14%	0.8%
Mixed - White & Black Caribbean	0.87%	0.46%	0.99%	77%	0.65%	0.2%
Mixed - White & Black African	0.46%	0.32%	0.77%	75%	0.26%	0%
Mixed - White & Asian	0.94%	0.9%	0.39%	74%	0.42%	0.2%
Mixed - Any Other Mixed Background	1.83%	0.73%	0.97%	94.7%	0.87%	0.3%
Black Or Black British - Caribbean	2.57%	2.43%	1.94%	86.5%	0.48%	0.2%
Black Or Black British - African	12.05%	10.86%	9.5%	88%	0.59%	0.6%
Black Or Black British - Any Other Black Background	0.69%	2.32%	1.36%	88%	0.83%	1.3%
Other Ethnic Group - Chinese	0.76%	0.62%	0.19%	100%	0.17%	0.2%
Other Ethnic Group - Any Other Ethnic Group	1.95%	2.43%	2.14%	92%	0.72%	0.8%
Undisclosed	2.77%	7.61%	6.42%	95%	22.86%	59.8%

SEXUAL ORIENTATION

	Applicants	Employed staff	Leavers	% of Professional Development Plans completed	Service users	Carers
Lesbian	0.23%	0.33%	0.58%	100%	0.18%	0.3%
Gay Man	0.9%	0.46%	0.99%	100%	0.25%	0.3%
Bisexual	4.9%	0.95%	1.3%	89%	0.26%	0.3%
Heterosexual	87.8%	68.74%	69.2%	89%	28.05%	22%
Refused	6%	24.8%	25%	92.7%	0.67%	-
Other	-	-	-	-	0.18%	0.1%
Unknown	0.17%	4.72%	2.93%	88%	67%	77%

DISABILITY

	Applicants	Employed staff	Leavers	% of Professional Development Plans completed	Service users	Carers
Yes	6.11%	3.11%	2.91%	95.45%	0.18%	0.6%
No	92.13%	69.93%	66.7%	88.77%	0.25%	0.4%
Not Defined	0.28%	18.86%	21.78%	93.2%	99.31%	99%
Undisclosed	1.48%	8.1%	8.56%	91.2%	0.26%	-

Disability Category	Service Users	Carers
None	0.25%	0.4%
Learning Disability	0.1%	0.1%
Long-term Health Condition	0.18%	0.2%
Mental Health Condition	0.2%	0.2%
Physical Impairment	0.1%	0.1%
Sensory Impairment	0.08%	0.1%
Not defined or recorded	99.31%	99%

RELIGION & BELIEF

	Applicants	Employed staff	Leavers	% of Professional Development Plans completed	Service Users	Carers
Atheism	18.56%	10.67%	11.6%	88.3%	1.4%	2.2%
Buddhism	1.4%	0.84%	0.77%	85%	0.02%	0.5%
Christianity	46.35%	44.2%	41.8%	89.2%	39%	8.2%
Hinduism	3.89%	3%	3.89%	86.2%	0.4%	0.5%
Islam	6.3%	4.15%	4.28%	94%	0.87%	1.2%
Jainism	0.13%	0.05%	0.19%	100%	0.07%	0.1%
Judaism	1.26%	0.9%	0.77%	95.2%	0.4%	0.8%
Sikhism	1.59%	0.68%	0.19%	76.9%	0.06%	0.13%
Other	10%	6.3%	7.97%	91.2%	5.4%	2.47%
Rather not say	10.19%	24.33%	25.4%	92.2%	0.68%	-
Undisclosed	0.17%	4.75%	2.91%	88 %	51%	83.2%

MARRIAGE & CIVIL PARTNERSHIP

	Applicants	Employed staff	Leavers	% of Professional Development Plans completed
Civil Partnership	1.66%	1%	0.39%	100%
Divorced	5%	6.77%	6.15%	89.6%
Legally Separated	1%	1.28%	1.58%	92.8%
Married	33.1%	53.1%	47.2%	89.4%
Single	54%	33.47%	37.89%	90.6%
Unknown	3.6%	3.22%	4.76%	92.7%
Widowed	0.75%	1.04%	1.1%	82.6%
Other	0.55%	-	-	-

NB Service user and carer data has not been included for this area as, in the context of the Equality Act 2010, this protected characteristic relates to employment.

Appendix 2 – Overview of Trust requirements re: Public Sector Equality Duty

In October 2010, the Equality Act 2010 came into effect. Prior to this time there had been over 100 pieces of legislation covering equalities protections and – with them – three associated public duties for race, gender and disability.

The Equality Act 2010 has brought with it a new – legal – public sector equality duty (PSED) requiring public bodies to declare their compliance with the duty on an annual basis. This means that HPFT must show compliance with both the general and specific duties of the PSED. This includes:

For the general duty showing how we have due regard to the need to:

- **Eliminate unlawful discrimination**, harassment, victimisation and any other conduct prohibited by the Equality Act 2010
- **Advance equality of opportunity** between people who share a protected characteristic and people who do not share it
- **Foster good relations** between people who share a protected characteristic and people who do not share it.

Protected characteristics – in the context of the PSED – are defined as:

- Age
- Disability
- Gender reassignment
- Pregnancy and maternity
- Race – this includes ethnic or national origins, colour or nationality
- Religion or belief – this includes lack of belief
- Sex (gender)
- Sexual orientation

It also applies to marriage and civil partnership in respect of the requirement to have due regard to the need to eliminate discrimination.

For the specific duty HPFT must:

- Publish information to demonstrate compliance with the general duty
- Publish data on the make-up of the workforce
- Publish data on those affected by HPFT policies and procedures
- Publish one or more equality objectives.

This document outlines how HPFT is currently complying with the PSED and working at maintaining a level of excellence in equality & diversity. Much of our evidence of PSED compliance is detailed through Trust Equality Delivery System 2 (EDS2) approached.

The PSED is a legal framework which requires the Trust to be compliant across **ALL** functions in meeting the needs of those with a protected characteristic.

Appendix 3 – Evidence list used for EDS2 re-grading

The following evidence was provided to stakeholders in helping them to reach conclusions about EDS2 grades. This was supplemented with verbal feedback by staff members in response to queries or clarity sought are certain pieces of evidence,

EDS2 Goals 1 & 2 – Service Provision
<ul style="list-style-type: none"> • Service Welcome Packs (draft copy for CAMHS) • Carer Handbooks • CQC inspection provider quality report • Spiritual Care Strategy • Equality Plan 2018-2022 (draft) • CAMHS Transition work including CQUIN Target 2016/17 • CQC ratings poster • Making It Real Action Plan (2017) • FFT scores for year by demography • Good Practice examples of Equality Impact Assessment: Physical Health Strategy 2017-2022 • Equality & Diversity in Procurement • Equality & Diversity training in Procurement survey • Different leaflets and resources aimed at protected groups. • Policy - supporting Gender Identity in HPFT services. • HYS questions by demography • HYS narrative re: experiences of protected groups. • HYS Action Poster (Aston Ward) • Equality and Unconscious bias training overview • 'My Care Plan' document • Remit for advocacy provision • Delivery of Care policy • HYS survey • Reviewing the options for Peer Support in the Trust Internal Paper(September 2017) • CQC 'Survey of people who use community mental health services at HPFT (2017) including demography data. • Sexual Orientation and Gender Identity: A guide for Clinicians working in Children and Young People's mental health and emotional wellbeing settings (2017)
EDS2 Goals 3 & 4 – Workforce
<ul style="list-style-type: none"> • Staff FFT results and trend analysis • Staff survey results 2015 & 2016 • WRES HPFT annual report – metrics 2016/2017 • WRES HPFT action plan 2017/18 • Stonewall Workplace Equality Index Evidence 2017/18 • Inclusive workplace guides • Bullying & harassment policy • Equal opportunities Policy • Family leave policies • Role models internal review paper (July 2017) • Staff benefits guide • CPD staff data by demography for 2017. • Staff employee data by demography for 2017. • Trust values leaflets • Terms of Reference for 6 Staff Networks • Agenda for 6 Staff Networks • Inclusion & Engagement Team Directory

- Wellbeing magazine articles
- Equality Plan 2018-2022 (not ratified)
- HPFT highlights pertaining to protected characteristics
- Programmes for our annual equality events
- Tool kits from annual equality events.
- Consultation feedback on WDES
- HPFT induction presentation/video
- Employee Assistance Programme info
- Pulse Survey Report and Data (Q3, 2017)
- Professional Development policy
- Coaching Information
- Flexible Working Policy
- Big Listen Feedback- 'Glass ceilings and sticky floors' (October 2017)
- Creating the Organisation we Want document
- Working Together as One Magazines articles
- Leadership Academy programme and outcomes
- Managing Service Excellence Programme and Outcomes
Inspire Awards Leaflet
- Staff Awards Information
- Disability confident live work plan
- Disabled staff guide for managers
- Recruitment & Retention Group (August 2017): Paper excerpts for BME and Disabled staff
- Guidance for HPFT Line managers and others in supporting Trans* Staff
- 'We said...We did' infographic (Q1, 2017)
- Recruitment external statement
- Staff self-service email for Electronic Staff Record.
- Involvement in staff networks email
- HPFT WRES Management Group meeting papers (November 2017)