

PATIENT EQUALITY AND DIVERSITY STRATEGY

2017 – 2021

Final

Ratified By:	Patient & Carer Engagement & Experience Group
Date Ratified:	4 th December 2017
Date(s) Reviewed:	
Version:	Final
Next Review Date:	December 2020
Responsibility for Review:	Head of Safeguarding, Dementia and Equality & Diversity
Contributors:	Deputy Director of Nursing Head of Safeguarding, Dementia and Equality & Diversity

CONTENTS

Foreword.....	3
Definitions.....	4
1 NATIONAL EQUALITY AND DIVERSITY AGENDA.....	5
1.1 Equality & Human Rights Commission	5
1.2 The Equality Act 2010.....	5
1.3 Public Sector Equality Duty – Our General Duties.....	6
1.4 Public Sector Equality Duty – Our Specific Duties.....	6
1.5 Equality Analysis.....	7
1.6 The Human Rights Act.....	7
1.7 The NHS Constitution.....	8
2 NORTHAMPTON PROFILE.....	9
2.1 Northampton Profile.....	9
3 THE TRUST’S PATIENT EQUALITY & DIVERSITY STRATEGY.....	10
3.1 Trust Vision and Values.....	10
3.2 Patient Equality & Diversity Group.....	10
3.3 The Equality Delivery System 2 (EDS2).....	10
3.4 Engagement, Involvement and Consultation for Patients.....	11
3.5 Monitoring and Publishing Information.....	12

Foreword

The purpose of this Patient and Equality Strategy 2017-2020 is to support the on-going achievement of Northampton General Hospital NHS Trust's overarching strategy to be a safe, effective and caring organisation. The Trust's guiding principle is to always put our patients first, to value each person as an individual and respect their diverse aspirations, beliefs and priorities.

We aim to deliver high quality services that are accessible, responsive and appropriate to meet the diverse needs of the different groups and individuals we serve.

To achieve this aim we want to ensure that service users are not subject to any form of discrimination or unequal treatment. Everyone can expect to be treated with equal respect and dignity regardless of their background or circumstances.

Leadership and commitment at all levels of the organisation is central to the success of this strategy. All Trust staff will have an important role to play with implementation of this strategy and we welcome the opportunity to involve and work with all stakeholders to promote equality in order to improve the services and working environment we provide.

This strategy sets out the Trust's approach to ensuring patient equality and diversity of service provision for our patients, complementing the parallel strategy for equality and diversity in our workforce. It explains the statutory duties placed on the Trust by the Equality Act (2010) and the Equality Duties (2011) and demonstrates the process by which these requirements are responded to.

Definitions:

Equality	Equality is about fair treatment - making sure everyone is treated fairly and given the same life opportunities. It is not about treating everyone in the same way, to achieve the same outcomes. Different people have different needs. For example making reasonable adjustments for disabled people (providing correspondence in audio for visually impaired patients removes barriers to equality of opportunity and helps prevent discrimination). Equality recognises that people's needs may need to be met in different ways.
Diversity	Diversity is about recognising difference. It recognises that everyone is an individual with their own background, experiences, styles, perceptions, values and beliefs and that we need to understand, value and respect these differences.
Inclusion	Inclusion is a sense of belonging, of feeling respected and valued for who you are.

1. National Equality and Diversity Agenda

1.1 Equality and Human Right Commission

The Equality and Human Rights Commission (EHRC) has been given a mandate by Parliament to challenge discrimination, and to protect and promote human rights. It is their mission to be a catalyst for change and improvement on equality and human rights by being an outcomes-focused strategic regulator, a promoter of standards and good practice, an authoritative centre of intelligence and innovation and a trusted partner. The Equality and Human Rights Commission also has powers to investigate and launch legal proceedings.

1.2 The Equality Act 2010

The Equality Act 2010 covers everyone in Britain and protects people from discrimination, harassment and/or victimisation because of the protected characteristics that we all have. Under the Act, there are nine protected characteristics:

- Age
- Disability
- Gender reassignment
- Pregnancy and maternity
- Race
- Religion and belief
- Sex
- Sexual orientation
- Marriage and civil partnership

Whilst the nine protected characteristics are often the most prominent when considering equality, the Trust acknowledges that other groups are often marginalised or do not have the same equity of access to services as others. Whilst this list should not be considered exhaustive, it provides an indication of the importance of a wide reaching Equality approach:

- People who misuse substances
- People who are unemployed
- People with dementia
- People who are ex-offenders
- People who learn in a different way
- People experiencing domestic abuse
- People who work in the sex industry
- People who are socially isolated

In addition to the Equality Duty (section 149 of the Equality Act 2010) the Trust must have regard for the following legislation and guidance:

Legislation	Guidance
Equality Act 2010	The NHS Constitution
Health and Social Care Act 2012	Equality Delivery System 2 (EDS2)
Care Act 2014	The Marmot Review 2010 – “Fair Societies, Healthy Lives”
Human Rights Act 1998	

1.3 Public Sector Equality Duty – Our General Duties

This strategy contains actions that meet our obligations from the Public Sector Equality Duty (Section 149 of the Equality Act 2010). The Equality and Human Rights Commission technical guidance on the Public Sector Equality Duty was revised in August 2014 and this obliges that the Trust in the exercise of its functions, has a due regard to the need to:

- Eliminate discrimination, harassment and the other prohibited conduct
- Advance equality of opportunity
- Foster good relations

The requirement in the Act to have due regard to the need to eliminate discrimination and other prohibited conduct means that the Trust needs to give advance consideration to issues of discrimination before making any policy decision that may be affected by them.

Having due regard to the ‘need to advance equality of opportunity’ includes the need for the trust to:

- Remove or minimise disadvantage suffered by people who share a relevant protected characteristic that are connected to that characteristic
- Take steps to meet different needs of people who share a relevant protected characteristic that are different from the needs of people who do not share it
- Encourage people who share a relevant protected characteristic to participate in public life for in any other activity in which participation by such people is disproportionately low.

The act specifies that ‘the need to foster good relations’ includes having due regard, in particular, to the need to tackle prejudice and promote understanding.

1.4 Public Sector Equality Duty – Our Specific Duties

To help deliver the general duty, there are also two specific duties:

Publication of Information

Publish equality information annually about service users to demonstrate compliance with the general equality duty – this is addressed through the Workforce Equality & Human Rights Strategy.

Equality Objectives

Publish one or more specific and measurable objectives to deliver the general equality duty.

The specific duties also state the information must be published in a manner which is accessible to the public.

1.5 Equality Analysis

Making Improvements

In order to meet the general equality duty, as well as to demonstrate the outcomes in the specific duties, it will be necessary before decisions are taken, policies adopted or practices changes, to ensure that an Equality Analysis is undertaken to assess the equality impact of what is proposed. The outcomes of undertaking Equality Analysis and demonstrating due regard are:

- It ensures that activities and procedural documents do not discriminate.
- It helps to promote equal opportunities
- It helps to identify if certain groups are, or could be, disadvantaged by a procedural document or a change
- It identifies where changes may be required to promote equality and eliminate discrimination.

Trust and Directorate business plans will include reference to, and specific actions of, equality actions.

Through the equality analysis processes it will ensure that the Trust is able to:

- Remove or minimise disadvantage experienced by people connected to 'protected characteristics'
- Take steps to meet the needs of people who share a protected characteristic where these are different from people who do not share it
- Encourage people who share a protected characteristic to participate in work activities or any other activity where participation is disproportionately low.

1.6 The Human Rights Act 1998

The Human Rights Act places all public authorities in the UK under a duty to respect the rights it contains in everything we do. We are under a duty not only to ensure that we do not commit human rights abuses but also we have a duty to take proactive steps in order to ensure that human rights are respected, protected and fulfilled.

These rights affect the rights of individuals:

- Human rights are about our basic needs as human beings
- Human rights belong to everyone, all of the time – not only certain groups at certain times
- They cannot be 'given' to us – only claimed or fulfilled
- They cannot be taken away from us, only limited or restricted in some circumstances
- They are about how public authorities, such as NHS organisations, must treat everyone as human beings.

In essence human rights are a set of universal minimum standards that must be met. They are not only about the protection of particular individuals and groups in society but are a practical framework to protect the rights of everyone.

Human rights values such as Fairness, Respect, Equality, Dignity and Autonomy (FREDA) underpin the public service ethos, the NHS Constitution and NHS Professional Codes of Conduct.

By putting human rights at the heart of health services we can not only comply with the law but also improve the quality of patient care.

1.7 The NHS Constitution

The NHS Constitution sets out rights for patients, public and staff. It outlines NHS commitments to patients and staff, and the responsibilities that the public, patients and staff owe to one another to ensure that the NHS operates fairly and effectively.

All NHS bodies and private and third sector providers supplying NHS services are required by law to take account of this constitution in their decisions and actions.

The principles that guide the NHS are set out in the NHS constitution which states:

- The NHS provides a comprehensive service, available to all irrespective of gender, race, disability, age, sexual orientation, religion, belief, gender reassignment, pregnancy and maternity or marital or civil partnership status
- Access to NHS services is based on clinical need, not an individual's ability to pay
- The NHS aspires to the highest standards of excellence and professionalism
- The NHS aspires to put patients at the heart of everything it does
- The NHS works across organisational boundaries and in partnership with other organisations in the interest of patients, local communities and the wider population
- The NHS is committed to providing best value for taxpayers' money and the most effective, fair and sustainable use of finite resources
- The NHS is accountable to the public, communities and patients that it serves.

In addition to the NHS Constitution, the Equality Act 2010 and the Human Rights Act 1998 provide the framework for recognising the importance of equality and respecting diversity in all aspects of the work at Northampton General Hospital (NGH).

2 Northampton Profile

2.1 Northampton Profile

Northamptonshire is a mixture of rural and urban areas, most of the population is concentrated in a north to south area, which includes some of the county's largest towns. One third of the total population lives in a rural area. Northamptonshire is situated at the apex of the National Transport Network, increasing both the diversity and transitory population.

<p>AGE</p> <ul style="list-style-type: none"> • Approximately 13% of the County's population is in the 5-15yrs age bracket • Approximately 15% are in the 65-84yrs age bracket 	<p>RACE</p> <ul style="list-style-type: none"> • Approximately 76% of the population self-identify as 'white', a -11% point change in the past decade • The largest minority population is the Black African, at 3.1%
<p>RELIGION AND BELIEF</p> <ul style="list-style-type: none"> • The predominant religion is Christian: 56.6% • 29.4% of the population identified no religious belief, the largest percentage point change (+10%) over the past decade 	<p>HEALTH AND DISABILITY</p> <ul style="list-style-type: none"> • 83% of the population report their health as 'very good' or good • 10% of the population report receiving between 1 and 50 hours of unpaid care per week; with 2.1% reporting in excess of 50hrs
<p>MARRIAGE AND CIVIL PARTNERSHIP</p> <ul style="list-style-type: none"> • 31% of the population are single persons • 49% are married and 0.2% are in a registered SSCP 	<p>SEX</p> <ul style="list-style-type: none"> • Northampton has a generally even gender spread, with an approximately 50% bias to both male and female

The principle town of the County, Northampton has a large university population of approximately 14, 000 students.

In the 2011 census, the population of the County was estimated at approximately 691,952. In 2015, approximate population estimations place the population at 723,026.

3 The Trust’s Patient Equality and Diversity Strategy

The Trust believes in the dignity of all people and their right to respect and equality of opportunity. The Trust values the strength that comes with difference and the positive contribution that diversity brings to the hospital. The Trust operates within the national framework of equality legislation, however, the Trust aims beyond simple compliance with the law. Equality is central to all that we do.

3.1 Trust Vision and Values

The Patient Equality & Diversity Strategy inherently aligns to and supports the Trust’s vision and delivery of the Best Possible Care.

The Patient Equality & Diversity Strategy is both supported by and, in turn, supports the Trust’s Clinical Strategy, incorporating Our Values and Strategic Aims:

Our Values	Our Strategic Aims
We put patient safety above all else	Focus on Quality & Safety
We aspire to excellence	Exceed Patient Experience
We reflect, we learn, we improve	Strengthen our local clinical services
We respect and support each other	Enable excellence through our people
	Ensure a sustainable future

This strategy has been developed to clarify for all the Trust’s stakeholders – patients, carers, staff, commissioners, providers, suppliers, local voluntary/community groups and members of the public – what they can expect from us in ensuring all people from the nine protected groups and other disadvantaged groups receive the health and care services they need.

3.2 Patient Equality & Diversity Group

The Trust has a Patient Equality & Diversity Group (PED Group) which is chaired by the Deputy Director of Nursing. The multidisciplinary group meets quarterly and are committed to embedding a culture of equality and inclusivity into all aspects of everyday life at the hospital.

The aim of the Patient Equality and Diversity Group (PED Group) is to successfully implement and monitor the progress of the Patient Equality and Diversity Strategy and the agreed four year EDS2 plan and objectives.

The PED Group reports to the Patient & Carer Engagement Group twice yearly and annually to the Trust Board by way of the Patient & Carer Engagement & Experience Group.

3.3 The Equality Delivery System 2 (EDS2)

The Trust will agree a four year plan with reference to public sector and other duties and to equality target groups. The objectives set encourage an outcome focussed

approach to setting challenging but measurable targets to improve service outcomes and the way we employ our staff.

At the heart of the EDS2 is a set of 18 outcomes grouped into four goals. These outcomes focus on the issues of most concern to patients, carers, communities, NHS staff and Boards. It is against these outcomes that performance is analysed, graded and action determined. The goals are:

- Better health outcomes for all
- Improved patient access and experience
- Empowered, engaged and included staff
- Inclusive leadership at all levels.

Following self-assessment, the outcomes have shaped and been mapped onto the actions planned within this equality and diversity strategy.

Within this strategy (Patient Equality & Diversity) we will focus on:

Goal
1. Better Health outcomes for all
2. Improved access and experience

The remaining two EDS2 goals (Empowered, engaged and included staff and inclusive leadership at all levels) are addressed through the Trust Equality and Diversity Staff group.

3.4 Engagement, Involvement and Consultation for Patients

The Trust is committed to involving and consulting patients, carers and the public by developing close links with our local population through members and staff to provide a framework for:

- Changes to existing services and how these changes are implemented
- The quality of services we provide
- The planning of new services

The Trust works towards ensuring that there is a flexible approach to involvement so that everyone, despite their background, location or particular needs can be involved.

The patient experience is at the heart of everything we do and in order to ensure that the Trust has sustained and meaningful engagement with representatives of service users from all protected and disadvantaged groups, the Trust ensures that issues raised through the different patient involvement groups and actions taken are reported, via the Patient and Carer Experience & Engagement Group (PCEEG), by the Patient Equality & Diversity Group and the Trust Board.

The Trust will establish a variety of patient groups which represent service users from protected groups:

- Mental Health Working Group
- Disability Champion Group
- Learning Disability Steering Group
- Dementia Steering Group

The Trust endeavours to ensure that people find it easy to raise their concerns, including those from the “hard to reach” groups, this will be demonstrated through:

- Using the annual Patient and Staff surveys, results from the Friends and Family question and issues raised in the ‘4Cs’ (Comments, concerns, complaints and compliments)
- Analysing the results of the equality and diversity monitoring exercises to improve patient, visitor and staff experience.

3.5 Monitoring and Publishing Information

Equalities monitoring data is the information the Trust collects about the demographics of our community, service users and staff. We will utilise the information to understand those who are experiencing discrimination or barriers to using our services.

In service delivery, monitoring can inform us which groups are using the services, in order that we can consider ways of reaching under-represented groups and making sure that our services are relevant to their needs and provided fairly.

Monitoring of service data is collected relating to the protected characteristics as defined in the Equality Act 2010. As part of our action plan, improvement will be made to ensure better quality data is provided and work is continuing in partnership with other NHS organisations in Northamptonshire. Data analysis will influence the Trust on future services.

In addition to the monitoring process the Trust will collect information by a range of different methods so that it is capable of assessing its performance and improving its services, these include:

- Keeping records to identify who is using Trust services and when
- Satisfaction surveys, with results analysed by target groups
- Random or targeted personal interviews
- Data on complaints, incidents and PALS enquiries, reviewed according to target groups
- Engagement with external reference groups regarding health matters
- Engagement with partner organisations, including the voluntary sector
- Engagement with patient participation groups in locally focused services
- Public consultation meetings and structured focus groups.

The Trust's Patient Administrative System is used to collect patient data relating to the nine protected characteristics. The Trust will review the type and amount of information collected to ensure that adequate data is available to determine the effect its functions and policies have on minority groups and report through the Patient Equality & Diversity Steering Group.

Directorates are encouraged to research local population data to highlight known health needs of the clients, particularly the minority groups, they serve and to take this information into consideration when developing or reviewing services and policies.

The Trust is required to publish sufficient information to demonstrate our compliance with the general duty across our functions on an annual basis.

Accessible Information

The Equality and Diversity Strategy, this summary, the appendices and the results of public feedback and the Annual Reports are available online at [Northampton General Hospital NHS Trust](#)

They can be made available in a range of accessible formats and languages upon request.

Other information required in different formats or languages can be obtained by contacting the listed author in a publication or leaflet or the signatory on a letter.

Alternatively, you can speak directly to The Patient Service Equality Lead, Human Resources Department or to a member of the PALS (Patient Advice and Liaison Service) team.