



# Workforce Diversity and Inclusion EDS2 Rating Event 10 March 2022

Review of National and Trust EDS Objectives 3 and 4 and Rating Recommendations





# **National Rating Categories:**

**E** = **Excelling** 

A = Achieving

D = Developing

**U** = **Undeveloped** 





#### **National Objective 3**

### Empowered, engaged and well-supported staff

The NHS should increase the diversity and quality of the working lives of the paid and non-paid workforce, supporting all staff to better respond to patient and community needs and becomes as diverse as it can be within all occupations and grades.

#### **CCS Proposed Rating 2021**

Outcome	Panel Rating 2021/22	Proposed Rating 2022/23	Our Actions	Evidence
3.1 Fair NHS recruitment and selection processes lead to a more representative workforce at all levels	E	E	<ul> <li>25<sup>th</sup> Jan 2022 CCS began using TRAC for recruitment. As of 22<sup>nd</sup> Feb 2022 CCS has moved fully from NHS Jobs to TRAC.</li> <li>Through the above we have assurance that there are processes and tools in place to monitor and record all aspects of recruitment activity and the Trust records and reviews reports on the progress of all applicants by the 9 protected characteristics. These are reviewed and monitored by the Workforce Diversity and Inclusion group, and an action plan is in place to address any areas of concern.</li> <li>Recruitment:         <ul> <li>Actions have been put in place in the past based on data, evidence and feedback including the introduction of the mandatory appointment of a BAME interviewer on all recruitment panels where a BAME applicant has been shortlisted and the roll out of mandatory recruitment training to all panel members (not just the chair);</li> <li>Values based recruitment, was introduced in 2015 is regularly reviewed to ensure all recruitment activity is based objectively on values to help eliminate conscious or unconscious bias. Recruitment training covers this;</li> </ul> </li> </ul>	R&R Policy; NHS Jobs Procedure; TRAC data and updated procedure; D and I Recruitment Reports; Minutes of JCNP meetings; Notes and action plan from Workforce Diversity and Inclusion group; Minutes of People Participation Committee; Slides from Induction; E learning packages;





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			<ul> <li>In 2021, the HR team took over the responsibility of delivering recruitment training (from the recruitment team) the HRBPs will publicise their role as the first point of contact for recruitment questions, and to support the recruitment team who support the administrative process of recruitment.</li> <li>In 2022, we introduced the HR resourcing Business partner role to focus on proactively engaging with service directors, leads and managers, to understand hard to fill roles, in order to lead on workforce planning. This will include considering new recruiting methods, looking at new and innovative ways to attract diverse candidates and improving candidate experience.</li> <li>Unconscious bias training:         <ul> <li>became part of induction for all new staff from May 2016 and is mandatory for all staff thereafter via e learning;</li> <li>Leadership Forum received an awareness rising session in September 2016;</li> <li>UB is a key part of recruitment training for recruiting managers.</li> </ul> </li> <li>A Cultural awareness information pack is available to all staff on the Trust intranet and for local discussion in teams.</li> <li>The Trust behaviours were updated and re launched in December 2017 and is used as part of the recruitment process.</li> <li>At shortlisting, all personal data is removed from applications to seek to remove any bias.</li> <li>During 2019/20 the patient engagement team began looking at how to increase service user involvement in recruitment and selection decisions, and many examples in place e.g. at a stakeholder panel for the new Trust Chair and other roles, and this work is ongoing. This is now in place and supported by a policy for guidance.</li> </ul>	Cultural Diversity Information for staff; National Cultural Competence E learning; D and I bi-weekly Comms Cascade messages; Trust Values and Behaviours; JD for Recruitment administrators;
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	Е	E	<ul> <li>CCS operates the Agenda for Change and Medical and Dental national pay and conditions. Pay and terms &amp; conditions are based on job evaluation only thereby ensuring equality.</li> <li>The Trust publishes annually its Gender Pay Gap report and reviews actions required arising from this. We have no equal pay for work of equal value issues and our action plan seeks to address the low representation of male workers in lower band roles compared to higher band roles.</li> <li>Job descriptions are reviewed annually at appraisal, allowing an opportunity for staff to highlight any role drift and request banding reviews.</li> <li>Staff can raise a banding review if they feel their role has changed and warrants a higher banding.</li> </ul>	Agenda for Change link to NHS Employers website; Agenda for Change Banding Process; Banding Review Process; Gender Pay Report; Appraisal Policy.
3.3 Training and development opportunities are taken up and positively evaluated by all staff	E	E	<ul> <li>The Trust has introduced a consistent process for recording and monitoring that staff have an annual appraisal, including a career and personal development plan review. We also record and monitor mandatory training compliance.</li> <li>Feedback is undertaken from staff on the quality of their appraisal/CPDP.</li> </ul>	SOS feedback report; Data on Mandatory training; Appraisal records; CPD training records;





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			<ul> <li>Appraisal documentation is regularly reviewed in light of staff feedback, most recently in 2019 with further revision planned for post pandemic.</li> <li>The Appraisal Career and Personal Development Planning process has shifted the emphasis to a discussion on wellbeing and staff development.</li> <li>Staff opinion survey and bi annual workforce reviews indicate equity of access to training and that all essential to role training is provided equally to all staff.</li> <li>The Trust has introduced e learning to make it more accessible to staff who may have limited working hours, reflected travel option etc.</li> <li>Uptake of Mandatory training and appraisals is reported to the Clinical Operational Boards and Trust Board.</li> <li>The Trust Board has oversight of lower-performing areas.</li> <li>Monitoring of the protected characteristics of staff accessing training takes place.</li> <li>Training is planned to be accessible to part time staff, and anyone with specific needs.</li> <li>Selection process in place to appoint staff into apprenticeships and for post registration programmes e.g. SCPHN, DN etc.</li> <li>When confirming a booking onto training staff are offered support in accessing online training and/or for other specific needs</li> </ul>	National Quarterly Pulse Survey; Uptake on Leadership development and training data; Evaluation reports from Trust training; Staff Opinion Survey; Local training plans; Trust wide TNA. Offering support for staff accessing online training
3.4 When at work, staff are free from abuse, harassment, bullying and violence from any source	E	E	<ul> <li>The Staff Opinion Survey Action Planning Group actions any B and H feedback from the survey.</li> <li>Zero tolerance policy and posters updated and re issued regularly, including a "Respect each Other "poster from the Chief Executive. Particular action take during BREXIT to support EU staff.</li> <li>Bespoke team support given to teams experiencing aggression from members of the public.</li> <li>Conflict resolution training was revised, including support from the patient engagement team in deescalation skills for teams experiencing high levels of abuse from service users.</li> <li>The Staff Anti Bullying and Harassment Policy is implemented for all reported cases.</li> <li>Policy on aggression from patients and the public is implemented.</li> <li>HR team monitors and supports actions taken on reported incidences of bullying and harassment.</li> <li>Trust jointly signed up to NHS call to action on bullying with our trade union colleagues.</li> <li>HR and Staff Side chair attend national annual partnership working events where a focus bullying and harassment is discussed and best practice shared by trusts.</li> <li>Staff Side Chair is a confidential advocate for staff raising concerns and this advertised in many ways.</li> <li>Cultural Ambassadors, introduced in 2017.</li> <li>Freedom to Speak Up Champions in place.</li> <li>Whistleblowing Policy.</li> <li>Resolution Policy agreed and implemented in 2018 to encourage staff to report B and H and to seek to address informally where possible.</li> </ul>	SOS action plan; Bullying and Harassment Policy including resolution process; Handling Violence and Aggression from the Public Policy; Posters; Cultural Ambassadors Policy; Whistleblowing Policy. My CCS Employment Passport Policy/ Guidance.





Outcome	Panel Rating 2021/22	Proposed Rating 2022/23	Our Actions	Evidence
3.5 Flexible working options are available to all staff consistent with the needs of the service and the way people lead their lives	E	E	<ul> <li>Health and Wellbeing Champions in place.</li> <li>See Me First Champions being introduced in 2022</li> <li>Cultural Diversity, Long Term Conditions and Disability, and LGBTQIA+ networks in place and feedback acted on.</li> <li>My CCS Employment passports in place.</li> <li>Training is being developed and offered to support staff and services experiencing violence and aggression from service users</li> <li>Ongoing work on system support across services (based on staff feedback)</li> <li>NB:</li> <li>The Trust acknowledges that it has further work to do to eliminate H and B fully, however the purposed rating is based on the actions in place and the acknowledgement that this is ongoing and never a completed task.</li> <li>The Trust has a range of flexible working policies available to staff.</li> <li>The Staff Opinion Survey allows staff the opportunity to say if these have been available to them and feedback shows staff feel the Trust is supportive with work life balance.</li> <li>All requests for flexible working are considered on an individual basis and bearing in mind service and patient needs as well as those of the individual. The Grievance Procedure is available to staff who feel a request for flexible working has been unreasonably declined.</li> </ul>	Flexible Working Policy; SOS results; Grievance Policy; Sickness, Absence Policy; Health and Wellbeing Policy; Working with a Disability and My CCS Employment
			<ul> <li>Staff who either cannot continue in their current role or who request adjustments to their role due to illness or disability or caring responsibilities etc. are supported to remain in our employment wherever possible.</li> <li>Trust commitment to narrowing the gender pay gap by offering flexible working in senior roles.</li> <li>Adjustments passport introduced in late 2019 and revised and updated in 2021 to become My CCS Employment Passport</li> <li>Revised and updated the Flexible Working Policy</li> <li>Introduced Critical Friend conversations where it is proposed to turn down a flexible working request in 2021</li> <li>Recording Flexible Working requests and outcomes on ESR</li> </ul>	Passport Policy/ Guidance; ESR recording of flexible working requests and outcomes;
3.6 Staff report positive experiences of their membership of the workforce	E	E	<ul> <li>Continued the work of the Live Life Well Programme to develop the Trust as a healthy and safe workplace and to promote the health and wellbeing of our workforce. This group includes a wide range of representatives.</li> <li>A board level Health and Wellbeing and Diversity and Inclusion Champion.</li> <li>Committed to Public Health Responsibility Deal Health at work pledges.</li> </ul>	Link to web Sites; LLW minutes; Comms Cascade and Connect articles; Staff survey results broken down by protected characteristics;





Outcome Panel Rating 2021/22	Proposed Rating 2022/23	Our Actions	Evidence
		<ul> <li>A Health and Wellbeing Policy.</li> <li>Trained Health and Wellbeing Champions across the Trust.</li> <li>Provided resilience and mindfulness Training.</li> <li>Mental Wellbeing Weeks run in 2018 and 2019</li> <li>Live Life Well information on the staff intranet;</li> <li>Appraisals and 1:1 discussions which include wellbeing discussion.</li> <li>Comprehensive Occupational Health and Counselling Services.</li> <li>The mainstreaming of the Rapid Access to MSK intervention service for all staff.</li> <li>The availability of training workplace assessors to support staff with MSK conditions</li> <li>Taken feedback via annual Staff Opinion Survey and National Quarterly Pulse survey. Feedback is also taken via two way Communication Cascade, Staff EDS events-via staff reps on Live Life Well Committee and via Staff Consultation Forum (JCNP).</li> <li>The Staff Opinion Survey reported high levels of staff motivation, satisfaction and of recommending the Trust as a place to work and receive treatment.</li> <li>Diversity / reverse Mentoring introduced 2020.</li> </ul>	SOS results; SOS action plans (Trust wide and Directorate level).

### CCS Local EDS Objective 3 – 2021/22

To support the development of a trust wide Anit Racism strategy and OD plan

We have

- Expanded our staff diversity networks with 3 staff led networks operational; one for staff from ethnic minorities, one for staff with a disability or long term condition and one for our LGBTQIA+ community. In addition we have established a menopause virtual café.
- Held a board development session, including the Cultural Diversity network chair, to discuss and start to form the Anti Racism strategy





- Engaged our Assistant Director of Organisational Development to work with our AD of Corporate Governance and D and I and others on developing the Anti Racism OD plan.
- Engaged with system wide and national D and I networks on anti racism plans.
- Supported BAME staff during the pandemic with specific tailored information on vaccines, disproportioned affects of covid and risk assessment/ adjustments.
- Continued with our Cultural Ambassadors programme of senior staff from ethnic minorities, acting as critical friends including in disciplinary and grievances involving staff from ethnic minorities and recruited 3 new CAs.
- With feedback from staff we have continually reviewed how we support the representation of staff from an ethnic minority background on selection panels where an applicant from ethnic minorities is shortlisted, to help address disparity between these applicants being shortlisted and appointed, including updating our anti discrimination practice recruitment training.
- · continued with our diversity mentoring, including reverse mentoring.
- continued with opportunities for ethnic minority mentors for Board members

Proposal that this Objective was met.





# **National Objective 4**

# **Inclusive Leadership at all Levels**

NHS organisations should ensure that equality is everyone's business, and everyone is expected to take an active part, supported by the work of specialist equality leaders and champions.

#### **CCS Proposed Rating 2021/22**

Outcome	Panel Rating 2022/22	Proposed Rating 2022/23	Our Actions	Documentary Evidence
4.1 Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations	E	E	<ul> <li>The Trust Board refreshes their equality and diversity training every 3 years.</li> <li>The senior leadership team and Trust Board Chair undertook awareness rising in unconscious bias in 2016 and the e learning in 2017 and ongoing every 3 years thereafter.</li> <li>The Trust's leadership behaviours cover ALL staff and include competencies around behaviour which is culturally sensitive and practices equality and diversity.</li> <li>Equality impact assessments are undertaken on ALL changes, policies and procedures within the Trust.</li> <li>Mentoring for BAME staff introduced in 2016 continues with mentors from senior BAME staff.</li> <li>5 Senior BAME staff trained and act as Cultural Ambassadors.</li> <li>The responsible officers for D and I (Staff and Patient) are part of regional diversity networks to share best practice.</li> <li>People Participation Committee chaired by a NED.</li> <li>The Trust is working on its first Workforce Disability Equality Standards plan.</li> <li>The Board are exploring ways to have representation at the board from more diverse backgrounds and in the past supported a member of the NHS NEXt scheme co-opted on to the board and plans to do so again.</li> <li>The Trust is supporting staff on the national Stepping Up programmes for the leadership development of BAME staff.</li> <li>The Trust supports the annual Women's Day, Black History Month and other D and I inclusion initiatives.</li> </ul>	Leadership Behaviours; Revised CCS behaviours; Comms and Zero Tolerance Posters with CEO message; Diversity Week; Staff Story at the board; Back to the floor visit actions; Annual E D and I report to the Board; Trust annual report.





Outcome	Panel Rating 2022/22	Proposed Rating 2022/23	Our Actions	Documentary Evidence
			<ul> <li>The CEO regularly writes articles in staff communications prompting diversity and supporting staff that may be experiencing discrimination, including personally appearing in a Zero Tolerance poster for Trust sites.</li> <li>Board members attended the Theatre style Training in 2018.</li> <li>Board held a session to discuss and endorse our Anti Racism stance in October 2021</li> </ul>	
4.2 Papers that come before the Board & other major Committees identify equality-related impacts including risks, & say how these risks are to be managed	E	E	<ul> <li>The template for Board (and Committee) papers includes a section to indicate how the equality and diversity objectives are met (where relevant) by the paper. It lists each equality and diversity objective and asks how the report supports achievements of each objective.</li> <li>All Board and Committee papers have this section completed.</li> <li>EIA policy in place.</li> </ul>	Board and committee paper template; EIA policy.
4.3 Middle managers and other line managers support their staff to work in culturally competent ways within a work environment free from discrimination	E	E	<ul> <li>The Trust has built the NHS Equality and Diversity principles into the staff behaviours and into specific equality &amp; diversity objectives for anyone who manages staff within the Trust.</li> <li>The Trust has a robust Bullying and Harassment Policy which specifically addresses robust line management and bullying and harassment.</li> <li>E and D is part of the induction for all staff and for the skills development programme for managers on Management training.</li> <li>Cultural awareness information is available to all staff.</li> <li>The Cultural Ambassadors introduced to ensure bias is challenged at and illuminated from formal management procedures where is seem to have had a factor, is now embedded in the Trust.</li> <li>Agreed Outcomes Policy introduced in 2018 to support resolution to issues and minimise negative outcomes.</li> <li>Positive feedback on support from managers in 2019 Staff Opinion Survey.</li> <li>Freedom to Speak Up Champions to support staff to raise issues</li> <li>Theatre style training for whole teams, encouraged some staff to raise issues which were resolved.</li> <li>Plan to revisit theatre style cultural awareness / competency training in 22/23</li> </ul>	Appraisal Policy; Leadership behaviours; Cultural barometer; Staff survey results; Breakdown of employee relations cases; Induction programme; Cultural Ambassador programme; Resolution Policy; Agreed Outcomes Policy; FTSU Champions; A range of leadership and management development opportunities.





#### CCS Local Objective 4 – 2021/22

To finalise the roll out of reverse mentoring as part of all in house development programmes.

#### Key Actions taken to achieve the CCS Objective

Diversity/reverse mentoring on-going

BAME colleagues mentoring board members .

Diversity/Reverse mentoring as part of our leadership programme has started now that we have just re started our in house leadership development programme, Chrysalis (on hold during the pandemic)