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Bwrdd Iechyd Prifysgol  
Betsi Cadwaladr  
University Health Board

## Fairness, Rights and Responsibilities



## Annual Equality Report 2011 -2012

‘Meeting the equality duties with substance,  
with rigour and with an open mind’

This report and any supporting documents can be made available in  
other languages or formats on request



**Please contact:**  
**The Corporate Communications Department**

Email: [bcuhbpressdesk@wales.nhs.uk](mailto:bcuhbpressdesk@wales.nhs.uk)

Telephone: 01248 384 939

Fax: 01248 384 731

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## Examples of good practice

Throughout this report, you will see boxes similar to that shown below. This is where we have captured examples of good practice from across the organisation that demonstrate how we are working to meet the requirements of the General and Specific Equality Duties and to improve patient experience by removing barriers and promoting equality of opportunity.



Good practice: Ethnicity information is routinely gathered during the admission procedure within the Mental Health & Learning Disability CPG; for community patients, this forms part of the Care Programme Approach. This is monitored by Healthcare Inspectorate Wales on their unannounced or short notice inspection visits.

## Introduction

Welcome to Betsi Cadwaladr University Health Board's (BCU HB) Annual Equality Report covering the period April 2011 to March 2012. Our focus this year was devoted to developing a thorough understanding of the Specific Equality Duties that were implemented in Wales during April 2011 and preparing our first Strategic Equality Plan (SEP), a requirement of the Equality Act 2010. The Act simplifies and strengthens anti-discrimination law, removes inconsistencies and makes it easier for our organisation to understand and comply with. We did this by working closely with our stakeholders and in partnership with other public sector organisations in North Wales to develop a number of joint equality objectives.

This Plan builds upon the progress of our Single Equality Scheme (SES) published in 2009. It seeks to ensure that equality is properly considered within the organisation and influences decision-making at all levels. Importantly it will promote knowledge and understanding of the general and specific duties amongst our employees and help shape the culture of our organisation.

The Chair, Chief Executive and Executive Management Teams of BCU Health Board are committed to advancing equality of opportunity and protecting and promoting the rights of everybody to achieve better outcomes for all. Evidence gathered from national and local reports and from staff and service users are being used to work with and support Clinical Programme Groups as they identify priorities for action and inclusion within their service plans.

We firmly believe this is the correct model to deliver sustainable improvements in our equality performance for the benefit of both service users and staff.

# Betsi Cadwaladr University Health Board

## About the Health Board

Betsi Cadwaladr University Health Board is the largest health organisation in Wales, providing a full range of primary, community, mental health and acute hospital services for a population of around 676,000 people across the six counties of North Wales as well as some parts of mid Wales, Cheshire and Shropshire.

The philosophy of the organisation is based on an inverted triangle, with a small corporate function that supports the strategic and operational delivery of clinical care through autonomous Clinical Programme Groups (CPGs) led by clinicians. These 11 CPGs are led by Chiefs of Staff; they unify the functions of the previous eight organisations by adopting a clinically led and accountable approach.



Good practice: Within Radiology CPG, equality, diversity and human rights are addressed under the category 'Equality', which is a standing agenda item at all CPG and directorate level Quality and Governance Meetings. Items from the Equality Operational Leads Group are brought to the CPG level meeting as appropriate by the CPG Equality Lead who is the Radiology Administration Manager, and is a member of both groups.

Our principles are laid out in the document A Strategic Direction 2009/12 with five key themes of; 'Making it Safe', 'Making it Better', 'Making it Sound', 'Making it Work' and 'Making it Happen'. We also have a 5-Year Plan that sets out how we will achieve this and progress is reported annually. A copy of the latest report for 2011/12 can be found at:

<http://www.wales.nhs.uk/sitesplus/documents/861/Year%20of%205%20Year%20Plan%20FINAL%20MASTER120711.pdf>

Our Annual Report also provides an update on progress as a Health Board and the latest available Report for the year 2011/12 can be found at:

<http://www.wales.nhs.uk/sitesplus/861/opendoc/198162/&6E4683CD-EB98-033B-59159EBFBAA2CF08>

Further information is available via our website at: [www.bcu@wales.nhs.uk](http://www.bcu@wales.nhs.uk) , or by contacting our Corporate Communications Department (see front cover for contact details).

## Key Strategic Documents

### Together for Health

Together for Health is a 5 Year Vision for the NHS in Wales. It was launched by the Minister for Health, Social Services and Children on the 1<sup>st</sup> November 2011 and sets the scene for an NHS that is fit for the 21<sup>st</sup> Century. It builds on the Bevan Commission's report reaffirming the importance and values of the NHS, yet recognising that a system of care designed in 1948 will not meet the needs of health care today.

Our local plans that reflect Together for Health will be part of an engagement and consultation exercise over the coming months building on much of the engagement work that has been done so far. It is based around community services with patients at the centre, and places prevention, quality and transparency at the heart of healthcare.



Good practice: The Governance and Communications Corporate Support Function have ensured that the BCUHB Engagement Framework and draft Engagement Membership Scheme for BCUHB are aligned to the requirements of the Public Sector Equality Duty on Engagement.

### Leading this Work at BCUHB

Equality and Human Rights are promoted as part of the strategic direction described above. Leadership support for the Equality and Human Rights agenda is provided at the highest level by the **Chief Executive and Chairman**, together with the **Executive Team**. The Chief Executive leads the organisation on behalf of the Board and is held to account for its performance, quality, safe delivery of care and governance. The Chief Executive is the Accountable Officer designated by the Welsh Assembly Government. As a member and leader of the Board of Directors, the Chief Executive sets the example for the organisation, its culture and behaviour, values and aspirations. This agenda is relevant to the portfolios of all Directors.

**Organisation Chart:** A copy of the BCUHB organisation chart can be accessed using the following link:

<http://www.wales.nhs.uk/sitesplus/861/page/40836>



Good practice: BCUHB has appointed an Independent Member of the Board as Champion for Equality and Human Rights. Jenie Dean has for many years been a keen advocate for the Equality and Human Rights agenda and her role will help to provide additional scrutiny at Board meetings.

## Our Values as an Organisation

The 'Big Conversation' was an engagement event, inclusive of all staff groups from within the organisation. It was intended to stimulate discussion, thinking and learning in order to create a common outcome which helped in developing values for Betsi Cadwaladr University Health Board.

The conversation involved a two-way dialogue between staff groups and senior executives along with key influential leaders from national organisations. The conversation began with questions posed to the panel of senior executives and key thought leaders, these questions were then debated in small groups with outcomes from each group captured.

The Values statements that emerged from these events (see [http://www.wales.nhs.uk/sitesplus/documents/861/11\\_044\\_2e.pdf](http://www.wales.nhs.uk/sitesplus/documents/861/11_044_2e.pdf) ) have been identified by our staff and stakeholders and help us to define and develop our organisational culture. We are working to make the values part of our culture and demonstrate them throughout the organisation to help us develop a shared way of behaving.

The FREDA principles (Fairness, Respect, Equality, Dignity and Autonomy) have under-pinned this work.

## Our Links with Public Health Wales

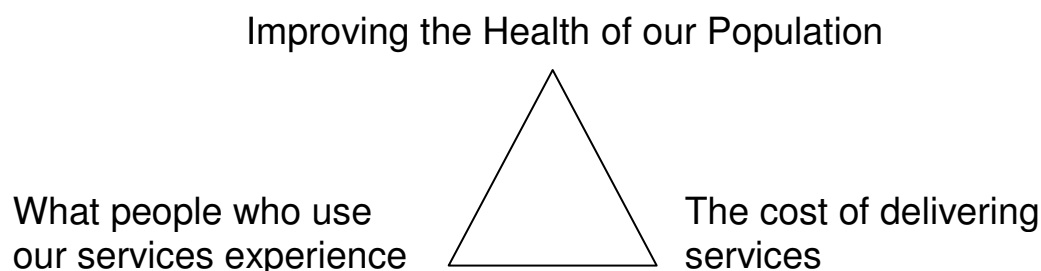
Reducing health inequalities is a whole-organisation responsibility. The corporate equalities team have supported Public Health Wales in making connections between public health and equalities agendas particularly those areas that evidence the link between socio-economic deprivation and health inequalities. We know, for example, that there are significant differences in life expectancy and in the prevalence of limiting long-term illness, disability and poor health between different socio-economic groups. The recently-published "Deprivation Profile of North Wales" helps provide detailed information about the extent and location of deprivation in North Wales.

Senior Public Health staff have been involved in, and provided advice on, the development of our strategic equality objectives.

### Local Public Health Strategic Framework

'Our Healthy Future', the Welsh Assembly Government's Public Health Strategic Framework, aims to increase years of healthy life and achieve fairer outcomes for the population of Wales.

As a Health Board, we have adopted the 'Triple Aim' concept developed by the Institute of Health Improvement to guide the development of all our strategies and action plans. As the diagram below illustrates, this has population health at its heart.



Our aim this year has been to raise standards to the best. We are a practicing public health organisation so we know the improvements that are needed will take time. We manage by:

- Focusing on improving the health of the population
- Improving the standard, quality and reliability of care including the experience people have and how it can be better
- Making sure we can control or reduce our costs thus making best use of the money we are given

As an “increase in years of healthy life and fairer outcomes for all” are good descriptions of what we mean by improving the health of our population, our Local Public Health Strategic Framework adopts the same aims as Our Healthy Future for the population of North Wales. A copy of the full document can be obtained via our website [www.bcu@wales.nhs.uk](http://www.bcu@wales.nhs.uk) or by contacting our Corporate Communications Department (see front cover).

Further information can be obtained from the BCUHB website and the latest Public Health Annual Report can be found at:

[http://www.wales.nhs.uk/sitesplus/documents/861/11\\_002\\_2e.pdf](http://www.wales.nhs.uk/sitesplus/documents/861/11_002_2e.pdf)

## Our Key Achievements During 2011/2012

### Key achievements include:

- We have worked collaboratively with partners in the public sector in North Wales to advance the equality agenda, to tackle issues on inequality that cut across the public sector in North Wales and to help us work more effectively and efficiently.
- We have worked collaboratively with Public Health Wales in making connections between public health and equalities agendas particularly those areas that evidence the link between socio-economic deprivation and health inequalities
- We have prepared and published evidence-based, outcome-focused equality objectives, following a review of existing national and local reports, literature and other evidence from stakeholders. The key report “How Fair Is Wales?” published by the Equality and Human Rights Commission in March 2011, has informed our work.
- We have undertaken engagement and consultation with a range of stakeholders to inform the development of the objectives so that they are relevant and meaningful to people in North Wales.
- The equality outcomes and objectives have been incorporated within planning guidance and inform the development of specific actions within Clinical Programme Group service plans that are proportionate and relevant to the clinical specialities
- A strategy to address the specific equality duties around assessing impact was developed during 2010 and has been implemented as a priority at the Health Board during 2011/12 (see “Assessing Impact” below)
- Equality Impact Assessment is embedded within our service review and policy-development processes. Our approach is one of “evidence-based policy making, not policy-based evidence gathering”.
- BCUHB equalities staff led the development of a new e-learning package for Equality and Human Rights in collaboration with service users; the package is called “Fairness, Rights and Responsibilities” and is mandatory training for all staff. The package is linked to, and promotes the Social Model of Disability, and recognises that the poverty, disadvantage and social exclusion experienced by many disabled people is not the inevitable result of their impairments or medical conditions, but rather stems from attitudinal and environmental barriers
- We have continued to develop our network of Clinical Programme Group Equality Leads. These are senior staff from all areas of the Health Board who have been nominated for a specific lead role in promoting the equality objectives within their respective areas. The network meets every two months and we have worked with the leads to develop an action plan for



2012/13 that aims to provide them with both the skills and the support they need to fulfil their role (see Role Profile at Appendix A)

- Service reviews
- Prioritisation and Decision-Making: The BCUHB Prioritisation and Decision Making Framework May 2012 sets out how BCUHB can no longer consider investing in any new developments unless they are clearly more effective, improve patient experience and health outcomes, and are at least equal in value for money to existing services or interventions. The BCUHB has to make these choices explicit, transparent and fair. It is recognised that proposals and Panel decisions contain sufficient information and evidence to enable the organisation to show 'due regard' to the equality duties in decision making and that methods for mitigating or avoiding adverse impact for people with protected characteristics have been identified and addressed. Training has been provided for the Prioritisation Panel in this regard, specialist equalities advice is provided at meetings and written practical guidance has also been developed.
- Workforce Information: We have made significant progress towards understanding the employment and pay reporting duties within the Welsh Specific Equality Duties and have led a number of initiatives designed to improve the quality of data we hold on our employees. This includes implementing employee self-service for large numbers of staff, lobbying for changes to the national ESR (Employee Staff Record) database and leading the work to agree a national minimum data set to define the minimum data necessary to create an employee record. We have also led the work necessary to meet the requirements of the Information Commissioner with regard to data security and informed consent.

## Our Equality and Human Rights Objectives

The specific equality duties for public sector organisations in Wales state that: A listed body in Wales must:

- Prepare and publish its equality objectives by 2 April 2012
- Publish objectives to meet the general duty. If an authority does not have an objective for each protected characteristic – in addition to any objective to address pay differences – it must publish reasons why not

We believe that our approach is inclusive and the table in Appendix F demonstrates that we have at least one equality objective for each protected characteristic. It is also important to understand that our objectives are not limited to the protected characteristics as defined in the Equality Act 2010 and extend, for example, to include other groups such as homeless people, where appropriate.

Our work to date started with a review of existing national and local reports, literature and other evidence from which a number of key themes have emerged in relation to equality. These are detailed in Appendix A as a number of high level Outcomes which describe what we are seeking to achieve. A number of Outcome Focused Objectives are then listed which will inform the development of specific actions by Clinical Programme Groups (CPG's) within their service plans that will help to tackle inequality and move us closer to the desired outcomes.

### Engagement and Consultation

We have undertaken engagement and consultation with a range of stakeholders to inform the development of the objectives detailed later in this report so that they are relevant and meaningful.

An event was held on the 21<sup>st</sup> September 2011. We asked those attending two key questions:

1. Do you think that the identified themes correctly capture the issues we should be addressing as an organisation – are there any gaps? and
2. What issues are most important to you?

The report on the feedback from this event is available from our website at

[http://www.wales.nhs.uk/sitesplus/documents/861/workshop\\_report\\_e.pdf](http://www.wales.nhs.uk/sitesplus/documents/861/workshop_report_e.pdf) .

The feedback from the event has been incorporated with work carried out to review our previous Equality and Human Rights Scheme, and with the work that we have been developing jointly with public sector partners, the result is the list of draft objectives shown in Appendix A.

These draft outcomes and objectives were approved for formal consultation by the BCUHB Board in November 2011. The draft objectives were also presented to the BCU Local Partnership Forum meeting with Trade Union representatives during November 2011 and were discussed with the Community Health Council at a meeting on the 14<sup>th</sup> February 2012.

Our Strategic Equality and Human Rights Plan incorporating these objectives was approved by our Board in March 2012 and is available from our website at:

<http://www.wales.nhs.uk/sitesplus/861/page/47421>

## Monitoring our Progress

### Scrutiny

The Equality and Human Rights Strategic Forum scrutinises progress and provide assurance to the Workforce & Organisational Development Committee which is a sub-committee of the Board. Scrutiny also takes place at the Forum through “Focus On” sessions where CPG representatives who are invited to present their action plans and progress on equality initiatives.

Membership of the Equality and Human Rights Strategic Forum comprises an Executive Director, Assistant Directors and senior staff from different disciplines across the Health Board, together with external stakeholders represented by the Community Health Council and a member of our Equality Stakeholder Scrutiny Group. The Terms of Reference for the Forum can be found at: <http://howis.wales.nhs.uk/sitesplus/861/page/47699>

We will undertake a review of the objectives each year and progress will be formally reported and published in our Annual Equality Report.

In addition to monitoring of progress by the Equality and Human Rights Strategic Forum and by the BCUHB Local Partnership Forum comprising managers and Trade Union representatives, we report regularly to our Equality Stakeholder Network that was instrumental in informing the development of our objectives. This group meets twice yearly, and comprises individuals and

groups representing people with protected characteristics and who have identified themselves as willing to work with us in this role.

These groups form part of a structure which has been established to ensure there is scrutiny of all our equality and human rights work. Items of significance from the Strategic Forum are reported directly to the Workforce and Organisational Development Director who also formally notifies these items to the Chairs of all other Board sub-committees and to Chiefs of Staff in writing.

## Reviewing and revising the Strategic Equality Plan

The Health Board will review progress towards our objectives every year and undertake a full review of the SEP after three years, working with staff and service users to take into account information gathered including outcomes of impact assessments.

## Other Scrutiny and Measures

### (a) Doing Well, Doing Better – Standards for Health Services in Wales

The Standards for Health Services in Wales are integral to the five year strategic framework for the NHS and key to underpinning the vision, values, governance and accountability framework for the new NHS Wales. They are at the centre of our drive for continuous improvement in the quality and experience of services and care that citizens of Wales have a reasonable right to expect.

The standards provide a key tool, alongside the learning from the 1000 Lives Campaign and other initiatives, in helping us drive up clinical quality and patient experience. They support us in making changes and improvements at the front line of care to improve our performance and in our drive to reduce harm, waste and variation within and across our services. They will continue to be a key element of the NHS Performance Improvement Framework through the Annual Quality Framework.



Good practice: Within the Children & Young People CPG, Equality, Diversity and Human Rights are core and cross cutting themes in the CPG's application of and adherence to the Standards for Health Services. In addition to the main standards of relevance – Standards 2 and 10 - the CPG recognises that all standards contribute towards the delivery of the equality and human rights agenda. Within the wider umbrella of Quality and Safety, the CPG Lead supports links between the Corporate Equality Team and the Standards. Active engagement takes place with Corporate Equality Team to ensure that appropriate areas of relevance are identified and to facilitate the gathering of information and evidence across CPG Service and Area Managers.

## **(b) Setting Measures for Improvement**

The evidenced based, outcome focused objectives for BCU HB were informed by the findings from the report 'How Fair is Wales?' This report offers a new perspective on some persistent inequalities and it identifies some new challenges. The report provides a baseline for measuring whether the decisions we take now help us to move towards a fairer society.

At BCUHB we recognise that the cultural shift we are seeking to achieve will take time and that this change is very difficult to measure. Following the triennial review of 'How Fair is Britain' expected to be presented to Parliament in 2013, we will be able to see more clearly where progress has been made and where more needs to be done.

To support this work we have identified outcome-focused objectives and supporting process-related objectives. The supporting action plan for 2012/13 includes current priority areas and clear agreed measures for service improvement, identifies other vehicles which will contribute to the delivery of our equality objectives and also identifies exploratory actions that need to be undertaken to give us the opportunity to gather and analyse more information to inform objective setting for 2013/14. We believe this is a robust and meaningful approach to meeting our equality duties and evidencing progress within the lifetime of this Plan.

## **(c) Key Performance Indicators (KPIs) for Equality and Human Rights**

BCUHB aims to develop a number of performance measures (key performance indicators or KPI's) for equality and human rights within Health Boards in Wales. This is being progressed in collaboration with Health Service partners and facilitated by the NHS Centre for Equality and Human Rights. The KPIs will help to assess progress and performance within Health Boards against a number of key measures including meeting the requirements of the Specific Equality Duties for public sector organisations in Wales.

It is expected that the KPIs will be piloted in the 2012/13 year for full adoption in 2013/14.

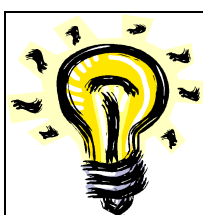
## **(d) Clinical Programme Groups Mid-Year Reviews**

Performance reviews are conducted regularly with Clinical Programme Groups and include the following where senior managers from CPGs are required to report progress in these key areas:

- How equality, diversity and human rights are incorporated into the governance arrangements of the CPG/CSF, including reporting mechanism

and links to the Equality Operational Group (Sub Group of the Equality and Human Rights Strategic Forum for BCU)

- How equality and human rights are promoted within the CPG/CSF and outline your arrangements for training staff
- How the CPG seeks to reduce health inequalities, including how and where the strategic equality objectives for BCU have informed CPG/CSF service plans
- How the CPG takes account of the needs of individuals, including, patients, service users, carers and staff, ensuring that engagement activity is inclusive and represents all protected characteristics?
- How EqIA informs decision making in the CPG/CSF. How the CPG Board seeks assurance of compliance with the equality duties in relation to policy and strategy development?



Good practice: The Equality lead for Therapies and Health Science CSF is the Clinical Audit and Effectiveness Manager. Structures within the CSF continue to develop; however the principles of equality are integral to departmental philosophy and practice. There is planned activity, such as development of strategy and work-plan documents (such as for clinical audit and effectiveness), which signpost future direction and structure. There are a number of current activities that evidence these working principles, including:

- The previous Clinical Audit and Effectiveness strategy included a request for a clinical audit topic selected for it's relevance to the equality and human rights issues. The current work on developing a new strategy document by BCUHB's Clinical Audit Group will also embrace these principles.
- There are research projects that focus upon the topics related to the equality protected characteristics.
- Integrated Care Pathways will all be Equality Impact Assessed. This is a positive development as this was not the case previously. Whilst this will be a challenge to regulate, any pathways that are registered with the department will be asked to complete/consider.

The development of the Equality and Human Rights KPIs described above will complement the mid-year and annual review processes and provide further, objective measures by which progress on equality and human rights issues can be assessed.

## Equality Information

It is important to be able to identify the information which informs us about the various functions we undertake; this can be summarised under two key headings: Service Provider and Employer.

Gathering and using evidence is at the heart of the Equality Duties and is part of the process in achieving greater equality. The Health Board recognises it is essential to have a clear picture and evidence base of how we are performing

on equality, measuring where individuals or groups, on the basis of their protected characteristics, do not currently experience fair treatment.



Good practice: Ethnicity information is routinely gathered during the admission procedure within the Mental Health & Learning Disability CPG; for community patients, this forms part of the Care Programme Approach. This is monitored by Healthcare Inspectorate Wales on their unannounced or short notice inspection visits.

Within BCUHB, we recognise the importance of the Specific Duties; the Equality and Human Rights Strategic Forum formed a Task and Finish Group to oversee the work of identifying equality information to help inform the development of our equality objectives.

The ways in which we have identified and gathered equality evidence as it relates to our role as a service provider include:

- A review of available evidence and literature in collaboration with other public sector organisations
- A further review of evidence and information by BCUHB Equalities Staff; this was further informed by work undertaken as part of our Task and Finish Group by Public Health Wales and BCUHB Librarians
- An engagement event held jointly with other North Wales public sector organisations in September 2011 to explore the key themes we identified from the above work
- A workshop with the BCUHB Equality Stakeholder Reference Group;
- Information that might indicate emerging themes identified from within our systems for logging concerns raised by service users (“Putting Things Right”) and other incidents (“Datix”)



Good practice: The Datix Incident reporting system has been reviewed and amended to enable the organisation to capture equality issues under each of the protected characteristics. An email is then auto generated and forwarded to the Corporate Equalities team for review and advice.

- BCUHB played a leading role in ensuring that the new complaints and concerns process for NHS Wales (Putting Things Right) incorporated the requirement for equality monitoring and have worked closely with colleagues in BCUHB to ensure our systems are designed to meet this requirement
- We contract an external organisation to undertake patient satisfaction surveys on our behalf. Discussions have taken place with the Assistant Director of Nursing to ensure that future commissioning of Patient

Satisfaction Surveys include a requirement to request information that is capable of being disaggregated across the protected characteristics



Good practice: Radiology CPG has been at the forefront of requesting appropriate information regarding patients' 'special requirements' in order to best address their personal needs when attending for radiological examination. The sharing of information is one of the most important factors in making appropriate adjustments to accommodate the needs of the individual.

The CPG undertakes regular patient surveys to identify any areas for improvement and to be able to take account of patients' views and suggestions. The CPG takes part in the All Wales radiology patient survey which has specific questions on dignity, respect and our ability to meet specific needs of the individual.

## Our Role as an Employer

BCUHB is one of the largest employers in Wales with a workforce of around 16,000 spread across the six counties in North Wales. Information relating to the equality characteristics of our workforce is gathered as part of the recruitment process via a national system known as NHS Jobs and this also enables us to understand the profile of people applying to work for us and whether or not they are successful.

The greater majority of equality information relating to employees is sensitive personal data as defined within the Data Protection Act 1988, and this information is held as part of the employee's record within the electronic payroll database known as Electronic Staff Record (ESR).

The level of declaration of equality information in ESR varies across the characteristics and this is a legacy of the information that was transferred into ESR from predecessor organisations when BCUHB was formed in 2009.

Improving the levels of confidence to increase disclosure of employee equality data continues to be one of the actions we are taking to meet the requirements of the Specific Equality Duties in Wales. This is being managed by the Workforce Information Systems (WfIS) Programme Board. Several work-streams have been established to look in detail at the requirements of the Specific Equality Duties and to put in place the necessary actions that will not only enable BCUHB to better meet these requirements, but will also enable us to better understand where we need to make adjustments for staff.





Good practice: Radiology CPG carry out regular risk assessments within the Departments, to ensure individual staff members' needs are taken into account by making reasonable adjustments to working environment and patterns as necessary. For example a staff member with a disability has had their working pattern changed, a specially designed chair obtained and work station modified to suit her needs. Other staff members have phones which are adapted to suit the use of hearing aids.

ESR is a national system for the NHS in the UK and therefore within BCUHB we are limited in what we are able to report by the information that is available to us. There are currently no fields within ESR for recording the characteristic of Gender Reassignment, nor is there provision for capturing information about staff who have caring responsibilities. We have, however, lobbied throughout the year for system changes so that we are better able to meet our statutory reporting requirements.

A major data cleanse of employee equality data will take place during 2012/13 to enable us to better understand the profile of staff working for us and this will help to inform workforce planning and future equality objectives. We are taking the necessary steps to strengthen the reliability and quality of our employment equality data to ensure that comprehensive and accurate reporting will be available from March 2013. Please see appendix B for details.



Good practice: The Equality lead for Workforce & OD CSF is the Head of Workforce Governance and Information. The list below represents a selection of the work areas where BCUHB Workforce & OD staff have made a positive contribution to promoting greater equality and human rights between April 2011 and March 2012:

- Identified and successfully lobbied for ESR data fields for gender re-assignment and carer status to enable NHS Wales to comply with Welsh Specific Equality Reporting Duties.
- Identified and successfully lobbied for NHS Jobs II to enable NHS Wales to report on the profile of staff applying for internal promotions via identification of 'existing BCU employees as internal applicants'
- Preparatory work for major equality data cleanse exercise carried out including the development of an electronic equality monitoring form.
- Rolled out ESR Self Service to Workforce & OD, IT, and Finance departments, which enables employees to update equality data on ESR through Self Service. Identified and lobbied for disability field to be accessible through Self Service.
- Developed an Equality Minimum Data Set which was subsequently adopted by NHS Wales.
- Developed a Gender Pay Action Plan as part of the Strategic Equality & Human Rights Plan.
- Developed a statement to ensure staff understand and are able to provide "explicit consent" for the collection, storage and use of sensitive personal data (as defined by the Data Protection Act 1988) which was subsequently adopted by NHS Wales.

## Assessing Impact

Our approach to embedding processes for Assessing Impact has been to ensure our staff understand the principles of Equality Impact Assessment (EqIA), and that it is not a complicated process. It is a structured process that is designed to ensure, as far as possible, that when we make a decision, develop a strategy or policy, or do anything else that affects our service users or staff, then we do so in a fair, accountable and transparent way taking into account the needs and rights of those who might be affected.

A strategy to address the specific equality duties around assessing impact was developed during 2010 and has been implemented as a priority at BCUHB through the following measures:-

- EqIA Procedure:- This document provides guidance for staff on what they need to do and includes links to other documents and an overview of the process we have adopted

- EqlA Toolkit:- BCUHB adopted the toolkit developed by the NHS Centre for Equality and Human Rights (CEHR) and adapted the toolkit for use in BCUHB that incorporated our own user feedback
- EqlA website:- We have developed our intranet site as a resource to help guide staff involved in undertaking Equality Impact Assessments, and to provide sign-posting to other support resources and information. The site also includes completed Impact Assessments so that staff can learn from good practice examples and a section specifically developed to support the embedding of impact assessments within service reviews (see below)
- EqlA Training and One-to-One support:- An extensive programme of training has been implemented across BCUHB. The BCUHB Board received a presentation in October 2011 on their role in scrutinising the implementation of the strategy for Equality Impact Assessment. Short presentations have been made to all CPG Boards to focusing on their scrutiny responsibilities, and a programme of 90-minute skills workshops has been held at all main sites across the area. We also held a number of 'drop-in surgeries' at main locations that have enabled staff undertaking assessments to obtain support



Good practice: Surgery and Dental CPG has ensured that EqlA is central to the Surgical & Dental CPG Prioritisation and Decision-Making Framework including such areas as new resource allocation, pathway redesign, and reprioritisation decisions.

Where any Impact Assessment reveals that there is a potential substantial adverse impact upon any of the protected groups which may impact on our ability to meet the general duty, we will publish the assessment on our Internet site.

## Service Reviews

Equality Impact Assessment is crucial to improving the quality of local health services and to meeting the needs of those using them by ensuring that consideration is given to the effects that decisions, policies or services may have on people; both service users and staff. Guidance was jointly developed with Planning colleagues and will ensure we are building equality and human rights considerations into service review projects.

## BCUHB Policy Development

The Corporate Governance department is responsible for ensuring that Equality Impact Assessment is embedded within our policy-development processes. EqlA is integral to our Policy for the Development of Policies and

Written Control Documents. We conducted an extensive programme of joint training during 2011/12 so that policy makers are clear about the need to ensure that equality impact assessment informs policy development and is not seen as a means of justifying policies that have already been developed. Our approach is one of “evidence-based policy making, not policy-based evidence gathering”.



Good practice: The Governance & Communications Corporate Support Function has ensured that staff understand their responsibilities with regard to the equality duties by embedding the duties within documents for which the CSF is responsible, including: Protocol for implementation and management of standards for Health Services in Wales; Risk Management Policy and Strategy; Standing Orders; Corporate Engagement and Communications Statement; Concerns Policy



Good practice: Our Improving Service User Experience team developed a Patient Information Policy for BCUHB which incorporates best practice in written information and provides advice to all staff in how to obtain and produce information in accessible formats.

## Promoting Knowledge and Understanding

### Equality and Human Rights e-Learning

BCUHB equalities staff led the development of a new e-learning package for Equality and Human Rights in collaboration with service users and in conjunction with a local supplier, and the package was rolled out to all staff in BCUHB in February 2012. It is called “Fairness, Rights and Responsibilities”.

Following the NHS re-structuring and changes to equality legislation we identified an urgent need to increase awareness of Equality and Human Rights issues throughout the organisation. This was reinforced by both staff and service users who identified staff training around equality and human rights as the highest priority for action within our Single Equality and Human Rights Scheme published in March 2010.

One of the Specific Equality Duties for public sector organisations in Wales, which became law on the 6<sup>th</sup> April 2011, requires BCUHB:

“..to make appropriate arrangements to promote knowledge and understanding of the general duty and specific duties amongst (our) employees.”

An e-learning package was viewed as the most effective way in which large numbers of staff would be able to access the necessary training at times, and

at a pace, that could be adapted to individual circumstances. We also recognise that a 'one-size-fits-all' approach will not necessarily meet all our equality and human rights training requirements: workshops and other job-specific training will continue to be provided as part of a 'blended' package of equalities training.



Good practice: Within our Surgery & Dental CPG, the BCUHB e-Learning tool was promoted at the management team meeting on 10<sup>th</sup> August 2012. Individuals have now been nominated for each area within the CPG to ensure all members of staff complete training before Dec 2013. The package will also be promoted in ward/departmental meetings and at medical staff induction.

The Equality e-learning programme has been incorporated into the Nursing and Midwifery Mandatory Training Programme which all midwives, nurses and support workers attend on an annual basis. The Senior Equalities Manager attended the Women's Services CPG Board in 2012 to discuss the Equality Training programme, and information has been cascaded to all medical staff and administration staff in the CPG.

Extensive engagement and consultation took place in the design and development of the content and format of the package with both staff who formed the Project Board, and with service users who were invited to join a Stakeholder Group. The final product adopts a citizen-centred approach and includes a number of patient stories that reflect this involvement and help to bring some of the principles to life.

The package is linked to, and promotes the Social Model of Disability. This recognises that the poverty, disadvantage and social exclusion experienced by many disabled people is not the inevitable result of their impairments or medical conditions, but rather stems from attitudinal and environmental barriers.

The concept of the package is to provide staff with information to enable them to understand the background to equality and human rights, together with the current legislative framework, including the general and specific equality duties. It also encourages them to translate the theory in practice by challenging staff to consider how the learning can be applied in their day to day jobs. Tools are provided to assist this.

The training is linked directly to the NHS Knowledge and Skills Framework (KSF) Core Dimension 6 (Equality and Diversity) and successfully completing the package will enable staff to demonstrate that they meet the requirements of level 2 of this dimension – this is the minimum level that has been set for all staff to achieve.



Good practice: Within Radiology CPG, training is promoted using the LHB e-learning facility as all staff members have some level of access to PCs. This is supported by regular staff development review, and checking conformity with the KSF equality levels. The CPG aim is for all staff to have completed e-learning by March 2013, and currently the CPG compares favourably with the rest of the BCUHB.

Reports showing progress on up take and implementation by CPG are being scrutinised at quarterly meetings of the Equality and Human Rights Strategic Forum.

## Other Ways in Which We Promote Knowledge and Understanding

Whilst we believe that providing good quality, up to date training that helps staff understand the relevance of equality and human rights issues to their day-to-day jobs is the most effective way of improving awareness and understanding, we also promote knowledge and understanding in many other ways, including:

- Our **website** has been developed to provide information and to help signpost staff to other sources of help and support. The site remains under regular review and reflects user feedback in terms of both content and format. We also use the website to promote campaigns and other events we believe staff may be interested in
- In addition to developing the new e-Learning package for equality and human rights, we have also provided a significant amount of other **training** that helps to promote knowledge and understanding
  - Equalities staff attend all induction sessions for new staff to provide an overview of our approach to equality and human rights
  - We provide regular “90-minute Workshops” to equip staff with the skills and knowledge required to undertake Equality Impact Assessments
  - Equalities staff have provided human rights training as part of a wider “Dignity In Care” programme for clinical staff
  - We have provided equality and human rights training as part of the Consultants Foundation Programme and regularly update Workforce and Organisational Development colleagues through team meetings
- Assistant Directors of Workforce and Organisational Development are members of **CPG Boards** where they provide advice on, and promote awareness of, the equality and human rights implications of the work of the CPG, and the decisions the CPG Board is making
- Our **Governance Structure** provides a mechanism for the management of equality and human rights strategy in BCUHB, including the notification of

areas of concern to the Chairs of all Board sub-Committees and Chiefs of Staff. Targeted training through an action learning approach has been provided to CPG Equality Leads to help build knowledge and understanding

- Equalities staff have provided regular **briefings on the latest case law** relating to equality and human rights which is circulated to all Directors/Assistant Directors, Chiefs of Staff/Assistant Chiefs of Staff and other appropriate staff within the organisation

## Language

### Welsh Language

The Health Board shares the Welsh Government's commitment to creating a bilingual Wales, as set out in "Iaith Pawb", its action plan for the language. There is specific legislation for the language, the Welsh Language Act, 1993. The BCUHB Welsh Language Scheme (<http://howis.wales.nhs.uk/sitesplus/861/page/42280>), which was approved by the Welsh Language Board under section 14(1) of the Welsh Language Act 1993 on 13<sup>th</sup> October 2010, describes how the English and Welsh languages will be treated on a basis of equality as we deliver health services to the people of North Wales and develop new policies, services and initiatives.



Good practice: The Equality Lead for Therapies & Clinical Support (T&CS) CPG is the Head of Speech and Language Therapy and is also the lead for Welsh Language Culture. He sits as an associate member of the CPG Board, and attends the Workforce & OD Committee. T&CS have completed a Welsh Language Audit during 2010-2011, which scopes the language competencies of staff within the CPG. (74% return) A Welsh language, culture and equalities report is presented orally and in written form on a bi-monthly basis to the CPG board.

Whilst executive accountability for delivery of the Welsh Language Scheme action plan remains with the Director of Governance & Communication, it is recognised that language choice is an important underpinning factor in ensuring a positive patient experience and meeting the principles of equalities and human rights. The Strategic Equality & Human Rights Forum will scrutinise access issues in relation to preferred language choice including Welsh Language and make recommendations where appropriate.

### Implementation of improved interpretation and translation services (WITS)

The Strategic Themes that underpin the BCUHB 5 Year Plan (2010/15) are ‘Making It Safe’, ‘Making It Better’, ‘Making It Sound’, ‘Making it Work’ and ‘Making It Happen’. Improving communication with service users is entirely consistent with these themes and with our Vision which states that service users should “...receive a responsive, safe and high quality service that is easy to access and understand.” This can only be achieved if we have in place a consistent, efficient and effective process to identify and meet their communication needs.

This provides a compelling business case, therefore, and is directly related to the Patient Safety, Governance and Equality and Human Rights Work-streams.

A project team was established to explore the potential implementation of a standardised approach known as WITS (Wales Interpretation and Translation Services). This provides a one-stop-shop service that is available round the clock, and has already been adopted by a number of other Health Boards and Local Authorities in Wales.

This important initiative was implemented across BCUHB from the 1<sup>st</sup> April 2012 together with operational guidance to ensure a consistent approach throughout the organisation.

## **Any other information that is relevant to meeting the General Equality Duty**

In addition to our equality objectives and service plans, a number of other initiatives are being progressed within the organisation that will enable us to better demonstrate how we are showing due regard to the General Equality Duty. These include:

### **British Institute of Human Rights nutrition and hydration project in collaboration with Merseycare NHS Mental Health Trust**

The project proposes to develop a toolkit for ward managers to put human rights at the heart of nutrition and hydration in the ward environment. It is being championed at Board level by the Director of Nursing, Midwifery and Patient Services who is the strategic lead for Nutrition and Patient Services. High quality nutrition and hydration are a basic human right, and part of our fundamental aspects of care.

The importance of good nutrition in supporting patients’ recovery is well recognised. Nutrition is an important factor that influences patient clinical



outcomes and also their satisfaction with the quality of care provided and hospital stay overall.

The toolkit will seek to embed dignity and respect and promote human rights with respect to nutrition and hydration within the everyday ward routine to ensure that it truly is a fundamental aspect of care, as a result of the development and implementation of the toolkit during the 12-month project implementation initial changes expected within the organisation would be increased knowledge, training and awareness around the concept of human rights and nutrition and hydration for the steering group, and operational groups.

Once the draft toolkit has been developed this increased knowledge and awareness would encompass the pilot area. The toolkit is designed to drive high quality nutritional care standards and ensure that ward managers and the wider multidisciplinary team have a practical toolkit to adopt a human rights based approach and apply relevant human rights principles to their everyday practice.

Once the toolkit was finalised the health board would implement via existing structures with sustainability and success of the toolkit in practice being monitored via matrons. It is expected that the project will be completed by September 2012.

## **Improving the Patient Experience for People with Learning Disabilities**

Betsi Cadwaladr University Health Board has pledged its support to MENCAP's 'Getting it Right Campaign and Charter'. The charter aims to enable people with learning disabilities to have access to the high quality health care they require and to which they have a right. The charter also aims to reduce discrimination against people with learning disabilities within the NHS. Guidance issued with the charter demonstrates ways in which this can be achieved.



Good practice: Our Speech and Language Therapy staff are developing 'easy read' written materials and documents to support the language impaired and learning disability population. The CPG will ensure that learning is spread to all component parts of the organization.

The Joint Committee on Human Rights (2008) highlighted the widespread denial of fundamental human rights to people with learning disabilities by mainstream public services. The former Disability Rights Commission, in a nationwide audit of access to health care for people with learning disabilities

(and also people with mental health problems) found that they were less likely to be offered health screening, fewer investigations were undertaken and they were subject to “diagnostic overshadowing”, in other words, presenting problems or symptoms tended to be attributed, by health professionals, as being part of the learning disability rather than some other health condition. The commission found evidence of “a complacency and a lazy fatalism that these groups ‘just do’ die younger”.

MENCAP’s 2008 report, *Death by Indifference* highlighted diagnostic overshadowing as one of the issues contributing to the deaths of 6 people with learning disabilities from alleged discrimination and lack of appropriate and timely treatment from the NHS and which in 2010 were the subjects of the Health Ombudsman’s critical report.

Government response to these reports has been to establish an independent inquiry which produced its report in 2008 making clear and strong recommendations for the way in which health services make provision and necessary adjustments in their interactions with people with learning disabilities and their family and carers and for the training and professional practice of health service personnel.

A Public Health Observatory and a National Confidential Inquiry are also being established. A task and finish group has been established involving senior clinicians and managers to drive implementation of the Charter by developing a Prevention and Action plan for the safe and high quality health care of people with learning disabilities within all parts of the Betsi Cadwaladr University Health Board. This work is championed by the Chief Executive and led by a Consultant Psychiatrist. It is expected that the project will be ongoing for the life of this Plan.

## Procurement

In common with most public authorities, BCUHB contracts with external organisations in the private and third sectors to carry out works and/or to provide goods and/or services on our behalf.

Our aim is to use our procurement activity to further equality in a way that is consistent with EU procurement rules by having due regard to the need to eliminate discrimination, advance equality of opportunity and foster good relations.

When procuring works, goods or services from other organisations on the basis of a relevant agreement, **BCUHB is committed to ensuring we:-**

- have due regard to whether it would be appropriate for the award criteria for that contract to include considerations to help meet the general duty

- have due regard to whether it would be appropriate to stipulate conditions relating to the performance of the contract to help meet the three aims of the general duty.

## **Our collaborative work with partners in the public sector in North Wales**

Equality leads in all 6 North Wales Local Authorities, BCUHB, Fire Service, Ambulance Service, Snowdonia National Park and North Wales Police have shared good practice for many years and have previously undertaken joint consultation events to share resources. With the introduction of the new legislation, this group have joined forces to work collaboratively to advance the equality agenda and to tackle issues on inequality that cut across the public sector in North Wales as required to meet the Statutory Equality Duties.

This work has led to the development of a number of high level equality outcomes and objectives which are being taken forward as part of the BCUHB business planning process within CPG and CSF service plans. These are listed below.

### **The Outcomes for People Living in North Wales**

- Reduction in **Health** inequalities
- Reduction of inequalities in **Employment**
- Reduction of inequalities in personal **Safety**
- Reduction of inequalities in **Representation and Voice**
- Improve **Access** to information, services and the built environment

### **Outcome Focused Objectives**

#### **Health Objectives**

- Increase the number of people, in under-represented groups, choosing healthy lifestyles
- Increase the number of people, in under-represented groups, accessing health care services
- Improve the care of older people ensuring they are treated with dignity and respect
- Improve uptake of preventative health care services by Gypsy Travellers
- LGB and Transgender people receiving care will be treated with dignity and respect
- Improve healthcare and outcomes for people with Mental Health problems and Learning Disabilities



Good practice: A Matron in Surgery & Dental CPG has completed a dementia action plan and has identified 'champions' for each of the wards/departments which is to be rolled out to all areas in BCUHB. One ward in Ysbyty Gwynedd has been identified as an area to improve the environment for dementia sufferers. Patients and relatives are encouraged to complete the 'This is me' document endorsed by Alzheimer's society.

## Employment Objectives

- Increase the Employment rate for under-represented groups
- Reduce inequalities within the employment cycle
- Reduce Gender pay differences
- Reduce the gender pay gap
- Improve staff awareness and understanding of equality and human rights issues



Good practice: Within the Mental Health & Learning Disabilities CPG, frontline staff receive training in how they meet the needs of people from protected groups. Additionally, senior managers are trained to ensure they oversee the design, delivery, quality and effectiveness of the organisation's functions and deliver services which genuinely meet the needs of the people we serve.

## Safety Objectives

- Increase the reporting of hate crime and harassment
- Increase the reporting of domestic abuse
- Reduce the incidence of hate crime, harassment and domestic abuse

## Representation and Voice Objectives

- Increase the numbers of people with different protected characteristics on decision making bodies
- Improve engagement with people from protected groups in the review and re-design of services.



Good practice: The Mental Health & Learning Disabilities CPG has adopted Guidelines for involving service users and carers in recruitment. Trigger points have been included in the Vacancy Control process to remind managers of their responsibilities to include service users and carers in recruitment from the outset.

Unllais (Third Sector organisation) is commissioned by BCUHB to support the involvement of service users and carers in adult mental health services, through the Involve Projects across BCUHB.

Appointment of a Service User and a Carer member of the CPG Board has been completed and service user/carer representatives sit on other sub-committees within the Governance structure.

People with lived experience, either as a user of services or a carer, are/have been appointed to CPG groups and committees.

The North Wales and North Powys Recovery Network has led on integrating good practice in Patient Narratives, and service users have delivered workshops and presented at conferences to share learning and expertise, and The North Powys project recently received a good practice award from the Welsh Government and has been delivering training workshops via the 1,000 Lives project.

## Access Objectives

- Improve access to the built environment by adopting inclusive design principles
- Identify and remove barriers to accessing and using services, including those faced by homeless people.
- Ensure complaints systems are fully accessible



Good practice: Radiology CPG receive regular inspections from the Community Health Council which focus on patient experience and accessibility, and any recommendations from these visits are acted upon in any areas which are within Radiology CPG's area of influence. Hearing loops are installed, all areas are accessible by wheel chair, lighting is designed to accommodate visually impaired service users, seating is of varied heights and some chairs have arms to facilitate easier use by those with limited mobility.

## Organisational Objectives

- Improve joint working between public sector organisations in North Wales including the development of common processes to enable them to meet the requirements of the public sector duties under the Equality Act 2010 (Statutory Duties) (Wales) Regulations 2011
- Reduce costs and duplication through collaborative working by sharing information and best practice to advance equality in North Wales
- Ensure the development of equality actions is synchronised with normal business planning processes by embedding within planning guidance for Clinical Programme Groups and Corporate Support Functions

## Our Values

These objectives are aligned to our Organisational Values which have been developed by our staff. The values reflect the FREDA principles (Fairness, Respect, Equality, Dignity and Autonomy). Making our values part of our culture and demonstrating them throughout the organisation will help us develop a shared way of behaving in everything we do.



Good practice: The values are now embedded within the Performance Appraisal and Development Review (PADR) process where staff are asked to describe and provide evidence, during their annual performance review, of how they have met each of the values within their role.

## Appendix A

### **Betsi Cadwaladr University Health Board Role of the Equality Lead**

Equality and Human Rights at Betsi Cadwaladr University Health Board. Our focus is to build a culture that recognises and respects equality and human rights as part of our everyday work. Equality and human rights principles are a core part of the Strategic Direction and five-year corporate plan. This ensures that meeting equality duties is a commitment running through all activities.

#### Equality Leads

All Corporate Support Functions and Clinical Programme Groups have identified Equality leads to attend the Equality Operational Group.

#### Equality Operational Group

The Group's role is to drive implementation of the Single Equality and Human Rights Scheme operationally. This will be achieved by providing training and guidance to and a supportive network for Equality leads driving implementation of the SES within Clinical Programme Groups and Corporate Support Functions. The Group will provide assurance that equality, diversity and human rights issues are mainstreamed into the strategic and operational planning of the relevant CPG/CSD and that CPG Boards, sub-committees and groups, are addressing equality and human rights requirements as part of their action planning, recognizing the diversity of the population and rights of individuals under equality, diversity and human rights legislation.

#### Equality Lead Competencies

- Knowledge and understanding of the principles of equality and human rights
- Knowledge and understanding of the Public Sector Equality Duties and implications for CPGs/CSDs.
- The ability to evaluate the extent to which legislation is applied in the culture and environment of area of activity.
- The ability to communicate and influence at all levels across the CPG/CSD

## Equality Lead Role Outline

The Equality Leads network will act as a link between the CPG/CSF and corporate equalities agenda. They will drive implementation of the Single Equality and Human Rights Scheme operationally. The network will receive training and support to increase members' knowledge and skills so they are better equipped to act as advisors to senior management teams. With support from the Corporate Equalities Team the Equality leads will advise CPG/CSF Boards who are responsible for ensuring that services are planned and delivered in a way that promotes human rights and are aligned to the equality duties and that systems are in place to mainstream equality, diversity and human rights principles into all organisational activity. Equality leads will escalate barriers to progress via the Equality Operational Group.

Equality Leads on behalf of CPG/CSF will provide assurance to the Equality Operational Group in the following specific areas:-

### Governance

- That there is clear accountability for equality and human rights within the CPG/CSF and that this is communicated to all staff
- Gate keeping is in place to ensure that Equality Impact Assessment informs decision making – no decisions are made or documents approved without evidence that the impact for equality has been assessed

### Engagement

- Engagement and consultation is inclusive and evidences involvement with such persons as BCU HB considers represent the interests of individuals who share one or more of the protected characteristics

### Equality Impact Assessment

- The principles of equality impact assessment inform decision making, are evidenced and published. The aim is to promote equality and human rights and seek to reduce health inequalities through CPG/CSF strategies, policies, practices and procurement processes.



## Gathering Information

- Relevant themes around human rights and equality issues including discrimination or disadvantage, are identified from concerns and are addressed. Issues of concern / risk are escalated to CPG Boards and the Equality Operational Group

## Standards for Health Services in Wales

- Compliance in respect of the Standards for Health Services in Wales: Standard 2
- Liaison with Health care standard leads to raise awareness of equality and Human Rights as a cross cutting theme with relevance to all Standards for Health Services

## Training

- Systems are in place to identify, ensure access to, and monitoring of training and development to advance organisational understanding and competence in respect of equality and human rights across the CPG/CSF

## Accessibility

- Patient information is published in accessible formats and barriers to access to services are identified and escalated to CPG Boards for action

## Communication

- Equality briefings are communicated to the CPG Board and across the CPG/CSF and information is disseminated. This will include organisational priorities raised by the Equality and Human Rights Strategic Forum, the work plan and activity of the Equality Operational Group

## Reporting

- Leads for each CPG/CSF will be required to compile an annual progress report for inclusion in the Annual Equality and Human Rights report, and provide other information as required

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## Appendix B

### **Betsi Cadwaladr University Health Board Information Relating To Our Workforce**

The quality and quantity of equality data we currently hold on our staff is not as good as we would wish and this is a legacy of the transfer of data from predecessor organisations when BCUHB was formed. We have therefore decided not to include the data in this report as we believe the gaps the we are aware of could lead to it being misinterpreted if published at this stage.

In order to ensure this information is as complete and up to date as possible, we are currently undertaking a comprehensive data cleanse exercise where we have asked all 16,000 staff to check and update the equality information we hold in our electronic staff record (ESR) payroll system.

BCUHB intends to publish information relating to our workforce in accordance with the specific equality duties for Welsh public sector organisations by no later than 31<sup>st</sup> March 2013.

We will be using the updated information not only to meet our reporting requirements, but also to inform actions to address any areas of inequality identified, and this work forms part of our commitment within our Strategic Equality and Human Rights Plan 2012/16 that is available on our website at: <http://www.wales.nhs.uk/sitesplus/861/page/47421> .