



# Fairness, Rights and Responsibilities



## Annual Equality Report

2016 -2017

‘a conscious approach and state of mind’



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



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# Foreword

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Welcome to Betsi Cadwaladr University Health Board's (BCUHB) Annual Equality Report covering the period April 2016 to March 2017.

This report provides an opportunity to highlight the Health Boards' work that contributes to a more equal Wales, where all people have the opportunity to fulfil their potential. It summarises the action we have taken to advance equality and includes many examples of excellent practice at our health board.

The Board is committed to advancing equality of opportunity and protecting and promoting the rights of everybody to achieve better outcomes for all. Our priority is to ensure that the patients we treat receive safe and high quality care, delivered with dignity and compassion and in a way that respects their individuality. We work closely with staff, patients and partners to embed equality and human rights principles into our ways of working and continue to engage with a range of stakeholders and subject experts to help assure our strategic direction.

This Annual Report provides an overview of our progress this year and also identifies those areas that have provided challenges. There is a lot to be done, but we are confident that we are well placed to maintain our progress. The Well-being of Future Generations (Wales) Act 2015 and the Equality Act 2010 provide us with an opportunity to advance equality in a more integrated and strategic way going forward.

If you have any comments or suggestions in relation to the contents of this report, please forward them either by post or by e-mail to:

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# Background and Context

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The Equality Act 2010 replaced previous anti-discrimination law, consolidating it into a single Act. The Act covers discrimination because of age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sexual orientation. These categories are known in the Act as 'protected characteristics'. The Act places a duty on the public sector to have due regard to the need to:

- Eliminate unlawful discrimination, harassment, and victimisation.
- Advance equality of opportunity between persons who share a relevant protected characteristic and those who do not.
- Foster good relations between those who share a relevant protected characteristic and those who do not.

In order for public bodies to better perform and demonstrate their compliance with the public sector equality duty, the Welsh Government legislated to bring in specific equality duties as set out in the Equality Act 2010 (Statutory Duties) (Wales) Regulations 2011 (also referred to as the Welsh Specific Equality Duties).

The Act aims to ensure that the Health Board and others carrying out 'public functions' consider how they can positively contribute to a fairer society in their day-to-day activities. There is a range of work taking place across BCUHB which actively promotes equality of opportunity, eliminates unlawful discrimination and fosters good relations. A number of developments from the past year are outlined in this report.

# Our Purpose, Vision and Values

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## Our Purpose

Our purpose is to improve the health of the population we serve and deliver excellent care.

## Our Vision

Our vision for the future is that:

- We will improve the health of our population, with particular focus upon the most vulnerable in our society
- We will do this by developing an integrated health service which provides excellent care delivered in partnerships with the public and other statutory and third sector organisations
- We will develop our workforce so that it has the right skills and operates in a research-rich learning culture

This vision sets out our ambition and will guide the work we undertake to plan and develop services for the future. It is an ambition that we are committed to delivering by engaging with our staff, population, partners and stakeholders.

Our vision of an integrated health service reflects our commitment to remove barriers between primary, community and hospital services, finding new ways of working which make the best use of resources and skills throughout our organisation.

Working in partnership to deliver our vision means that integration with other organisations and services will also be key to our success, whether that be with statutory partners, the third sector or with communities directly.

## Our Values

Whilst having a clear vision is essential, if we are to work together to deliver improvement in the future this achievement will only be possible if we have a shared set of values which guide our behaviours and focus. We have previously worked with our staff to identify the values that we all wish to adhere to. Feedback through surveys and other channels has identified that these values are not always evident throughout our organisation and we will therefore commit to a concerted focus upon these values going forward. Adoption of these values means that we will:

- Put patients first
- Work together
- Value and respect each other
- Learn and Innovate
- Communicate openly and honestly

The human rights principles of fairness, respect, equality, dignity and autonomy (FREDA) underpin these values.

## **Our Strategic Goals**

- Improve health and wellbeing for all and reduce health inequalities
- Work in partnership to design and deliver more care closer to home
- Improve the safety and outcomes of care to match the NHS' best
- Respect individuals and maintain dignity in care
- Listen to and learn from the experiences of individuals
- Support, train and develop our staff to excel
- Use resources wisely, transforming services through innovation and research.

# Key Achievements in 2016/17

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- ✓ We have engaged with individuals and groups representing people with protected characteristics at many events and meetings to increase our understanding of the key issues and barriers facing people with protected characteristics.
- ✓ We have continued to meet with our Strategy & Planning Equality Scrutiny Group which advises on, and provides scrutiny for, Equality Impact Assessments associated with the development of key BCUHB strategies.
- ✓ We launched an Accessible Healthcare Toolkit for use by ward staff across BCUHB to better meet the needs of people with sensory loss.
- ✓ We retained our “Top 100 Employer” status in the Stonewall Workplace Equality Index 2017 benchmarking exercise.
- ✓ We held our first Equality Week that included collaboration with a number of organisations and was centred around the annual flag-raising ceremonies held at each District General Hospital site in celebration of International Day Against Homophobia, Biphobia and Transphobia (IDAHoBiT) day in May.
- ✓ We have been working with Victim Support to develop a proposal to pilot a drop-in centre for staff at Wrexham Maelor Hospital to be launched in Spring 2017.
- ✓ We have continued to deliver planned and ad-hoc mandatory equality & human rights training to increase compliance in the last 12 months by 20% to 67% across BCUHB (as at 31<sup>st</sup> March 2017); additional training delivered for Mental Health and Learning Disabilities staff has increased their compliance to over 77%.
- ✓ We conducted a number of focus group sessions for women working at BCUHB to identify issues particular to them and to scope the development of a Women’s Network.
- ✓ We implemented a pilot for a ‘Reverse Mentoring’ programme with the cooperation of three Board members.
- ✓ We secured ‘Disability Confident Employer’ status under the new scheme which replaces the Disability Two-Tick scheme.
- ✓ The LIFT Programme at BCUHB has increased training and employment opportunities for people living in households where no-one is in work.
- ✓ We issued a questionnaire to scope awareness of, and interest in new staff networks that clearly shows there is interest amongst BCUHB staff.
- ✓ We have considered the requirements of the Well-being of Future Generations Act and reflected upon our previously published strategic goals.



# Meeting Our Equality Duties

## Engagement

The Welsh Specific Duties state public sector bodies must 'involve people who it considers representative of one or more of the protected groups and who have an interest in how an authority carries out its functions'. This duty to engage provides the health board with expert support and advice in terms of understanding the key issues and barriers facing people with protected characteristics.

For a number of years we have been working with individuals and groups who represent the interests of people with different protected characteristics and who have an interest in the way the health board carries out its functions to help determine our priorities. This includes:



- former and current staff, including staff equality groups
- trade unions
- third sector and equality organisations
- the wider community.

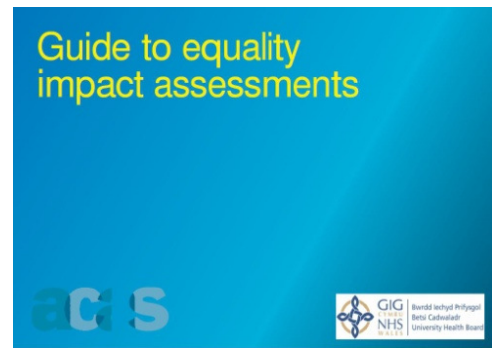
A priority for the health board this year has been the development of our engagement strategy which outlines our legal duties in relation to community engagement and consultation. The approach sets out our genuine desire to work together with our communities and partners to develop services that meet local needs and ensure there is a wider understanding of why change might be needed. BCUHB recognises that involving people in the planning, design and delivery of services helps build partnerships with communities to identify local issues and areas for service improvement. The strategy recognises the diversity of our communities not only in terms of protected characteristics, but also those experiencing other challenges such as rural isolation, deprivation, language barriers and health inequalities.



Over the last year the corporate engagement team has worked closely with our communities to ensure that all our citizens have opportunities to engage with us in a meaningful way. It is important that we seek and understand the views of representatives of those from protected characteristic groups and the seldom heard. This intention runs through all of our engagement plans and



We have been working with ACAS to adapt a managers' guide to EqIA that they have developed for their own internal use. This document provides a straightforward introduction and guide to Equality Impact Assessment, and ACAS welcomed the opportunity to work with us and to jointly endorse the document which is now widely available across BCUHB and issued to all who attend our skills workshops.



Our scrutiny group has met on a number of occasions during the year and membership includes key BCUHB staff together with external stakeholders and members of the Corporate Equality Team. Key developments considered by the group during the year included:-

- The Outpatients' Strategy and Vision
- The approach to Living Healthier, Staying Well Strategy development
- The Engagement Strategy
- The approach to the development of the Mental Health Strategy
- BCUHB Operational Plan 2017/18

## **Procurement**

Building upon changes that were implemented with BCUHB's Standing Financial Instructions, there are a number of ways in which equality considerations are embedded within procurement processes, which are managed on our behalf by NHS Wales Shared Services Partnership (NWSSP).

A requirement of the Sustainable Procurement Policy (v3 March 2017) includes :-

**Equality & Diversity:** Suppliers and/or their sub contractors are expected to comply with the Equality Act 2010 and any other applicable equality legislation taking all reasonable steps to promote equality and diversity, including race equality, equality of opportunity for disabled people, gender equality and equality relating to religion and belief, sexual orientation and age in the provision of contracts.

In addition, there are a number of questions relating to equality practice that contractors are required to complete when seeking to tender for supplying goods and/or services to BCUHB. These include questions about equality training for managers and front-line staff, and whether the organisation has had any findings of unlawful discrimination following proceedings in an employment tribunal, for example.

## **Gathering Information Relating to Our Service Users**

### **Population Needs Assessment**

This year has seen the publication of the assessment of the care and support needs of the population in North Wales, including the support needs of carers. It has been produced by the six North Wales Councils and Betsi Cadwaladr University Health Board (BCUHB) supported by Public Health Wales, to meet the requirements of the Social Services and Well-being Act (Wales) 2014 (the Act). For more information see <http://www.wales.nhs.uk/sitesplus/861/page/91335>

### **Carers Rights and Support**

The major change brought about by the Act is that Carers are now afforded the same statutory rights as the cared for. The Act imposes duties upon local authorities and Health Boards that requires them to promote the Well-being of those who need care and support or carers who need support. Part 9 of the Act promotes the principle of partnership and integrated working in order to provide services that prevent the escalation of needs and to ensure that the right help is available at the right time.

In order to extend the work already undertaken to support carers and to work in accordance with the principles of the Act, BCUHB is working in partnership with all six local authorities and the North Wales Social Care and Well-being Services Improvement Collaborative. We are working collaboratively to ensure that consistent carers support services are available. This assessment identified that there are over 79,000 unpaid carers across North Wales and this figure is increasing. Over the next 12 months we aim to deliver extensive training and awareness raising to ensure that as Health professionals we are promoting the rights and Well-being of carers. For any further information or support please contact: [BCU.Carers@wales.nhs.uk](mailto:BCU.Carers@wales.nhs.uk)

### **Well-being Assessments**

We are working with Public Services Boards (PSB) in accordance with the Well-being of Future Generations (Wales) Act 2015. An assessment of well-being for each PSB area has been published. The Act is a new law that aims to get public services and communities working together to tackle the challenges Wales faces now and in the future in order to improve the long-term social, environmental, cultural and economic well-being of Wales. The Well-being Assessments seek to capture the strengths and assets of its people and communities. They also seek to describe the challenges and opportunities faced both now and in the future. For further information see local authority websites where the assessments are available.

### **Gathering Equality Information from Patient Experience Feedback**

This year we have been working to strengthen equality information gathered as part of patient experience feedback. The Patient Experience Team has been gathering and analysing available equality information as part of their ongoing data collection systems and processes. This information is included in the Listening and Learning reports presented to the Quality, Safety and Experience Committee.

## **The NHS Inpatient Survey**

The NHS Inpatient Survey is an established instrument for measuring and reporting service user satisfaction and is utilised nationally within the NHS in Wales. The survey is administered to a random sample of 1,000 service users who have been identified as inpatient in the previous 3 months period. Response rates at approx 30% are high for these type of postal, self-reporting instruments. The survey also contains fields which enable responders to identify their protected characteristics. High level findings include that respondents who reported that their day-to-day activities are limited because of health problems or a disability which has lasted, or is expected to last, at least 12 months, reported lower levels of service user satisfaction. Female service users also reported lower levels of satisfaction than male service users.

## **I Want Great Care**

The 'I Want Great Care' patient satisfaction system captures real-time patient feedback from service users. This system has been piloted at Wrexham Maelor Hospital. We are disaggregating the information gathered in respect of protected characteristics where possible. Tentative conclusions suggest that there are differences in levels of satisfaction for some groups.

This work will be further developed this year. A real-time patient feedback system, that will enable data collection across the whole health board, is being procured. Further information is available from the Patient Experience Team, [peter.morris2@wales.nhs.uk](mailto:peter.morris2@wales.nhs.uk)

## **Information Relating to Our Workforce**

Information relating to the equality characteristics of our workforce is held in our electronic payroll system (ESR) however the system does not have the capacity to record an employee's transgender status, nor does it hold information relating to an employee's caring responsibilities.

Information on job applicants is gathered as part of the recruitment process via a national system known as NHS Jobs. This also enables us to understand the profile of people applying to work for us, whether or not they are shortlisted for interview, and whether or not they are successful. Information relating to people appointed becomes part of their ESR record.

Each year we publish a range of employment and pay reports required by the Specific Equality Duties for Listed Bodies in Wales and these are available on our website at: <http://www.wales.nhs.uk/sitesplus/861/page/63948> together with a 'commentary' on the key points of interest in the reports.

This commentary was the subject of discussion at our Strategic Equality & Human Rights Forum during the year and a number of key statistics were identified for further scrutiny and analysis as shown in the table below. These will be the subject of further discussion and progress monitored at future meetings of the Forum.

Table 1. Key Employment Statistics

Key Statistic/Issue	How are we addressing any issues?
<p>The numbers of young staff (under 25) remain disproportionately low (3.4%) compared to 2011 Census (11.1% of population). This coincides with a 32% increase in the proportion of over-60's in the workforce during the last 4 years.</p>	<p>BCUHB launched its "Step Into Work" programme which provides a systematic programme of opportunities for a range of people, including young people and others who are furthest from the job market.</p>
<p>Under-reporting of protected characteristic information by staff in several groups (disability, ethnicity, religion and sexuality) remains a problem. This distorts the statistics and makes the reports less reliable.</p>	<p>We need to explore more innovative ways of encouraging more people to update their protected characteristics in ESR.</p> <p>Celtic Pride (our LGBT Staff Network) is considering ways of encouraging more LGBT staff to update their information.</p> <p>We are working with other public sector partners to benchmark good practice in their organisations.</p>
<p>Less than 5% of people applying for jobs declared they are disabled.</p>	<p>We need to find ways of encouraging more applications from disabled people.</p> <p>We have recently been granted "Disability Confident Employer" status under the new Disability Confident Scheme which is designed to replace the former Two-Tick Symbol Scheme. We are also working towards advancing to "Disability Confident Leader" status within the next 12 months.</p>
<p>93% of part time posts are held by women, and 43% of these posts are in bands 1 to 3.</p>	<p>There are clearly barriers that prevent staff moving out of low-paid part-time work, the greater majority of whom are women.</p> <p>We are working with Citizens Advice to help staff better understand the links between earnings and benefits and hope to provide more access to routes out of low-paid, part time work.</p>
<p>Overall, men in Medical &amp; Dental staff groups earn substantially more than women (this gap is even higher when you look at full time staff only)</p>	<p>We plan to identify the issues giving rise to, and sustaining, pay gaps in this area, by engaging with the Office of the Medical Director.</p>

# Our Strategic Equality & Human Rights Objectives

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## Introduction

The Strategic Equality and Human Rights Plan (SEP) seeks to ensure that equality and human rights is properly considered within the organisation and influences decision-making at all levels. We work within the requirements of the legislation and with the guidance of the Equality and Human Rights Commission. Evidence has been gathered from national and local reports and from staff and service users to inform this work. We have listened, and continue to hear key messages and value this feedback which has led directly to the development of our Strategic Equality Objectives. The key themes are mapped to the relevant Strategic Goals for the Health Board, and are identified in the SEP as follows:

- **1: Better health outcomes for all: to achieve better health outcomes for everyone, having regard for a person's protected characteristics.**
- **2: Improved patient access and experience: to improve access and experience for everyone, having regard for a person's protected characteristics, with a focus on dignity and respect.**
- **3: Becoming an employer of choice: to be a fair and inclusive employer and build a workforce that is equipped to meet the diverse needs of our service users and colleagues, having regard for a person's protected characteristics.**
- **4: Inclusive leadership at all levels: to provide the vision and motivation to advance equality at BCUHB and harness the energy and efforts of others to make improvements.**

## **Strategic Equality Objective 1 (Maps to BCUHB Strategic Goal 1)**

Better health outcomes for all: to achieve better health outcomes for everyone, having regard for a person's protected characteristics.

### **Health Inequality**

Stark inequality in health outcomes exist in North Wales and those with the highest levels of health need do not always receive the services and support they need.

Our Annual Operational Plan therefore remains focused on continuously improving the ways in which we identify and recognise in individuals, families and communities the conditions which increase the risk of inequalities; redesign the way we prioritise and deliver preventative and early interventions; and measure and evaluate the impact of what we do on those with the greatest need. Further information is set out in the Annual Operational Plan 2017-2018 on our website at:

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

### **Living Healthier Staying Well**

During 2016/17, we commenced work on developing our Strategy for Health, Well-being and Healthcare, under the Living Healthier, Staying Well programme.

We are focusing on three key areas:

- Improving health and well-being and supporting the most vulnerable
- Providing care and support closer to home
- Developing hospital services including planned and emergency care and cutting waiting lists

The approach to this work recognises that we have a significant amount of work to do with individuals, communities and other agencies to better understand the inequalities which arise as a consequence of differences including those identified as protected characteristics. Equality impact assessment is informing the development of this work. For more information, please see our website at:

<http://www.bcugetinvolved.wales/living-healthier-staying-well/>

### **Well North Wales Programme**

The past year has seen the development of a new approach to addressing inequalities in health in North Wales. The "Well North Wales" programme takes its inspiration from programmes developed in the North West of England and in London, working with local people in small geographical areas to identify new and different opportunities for improving health by redesigning the way local services are delivered. Health inequalities must be addressed on a partnership and multi-agency basis, as many of the key issues fall outside the primary domain of the NHS. In establishing the Well North Wales programme, the Health Board aims to ensure that the health aspect of anti-poverty programmes, and the work around the social determinants of health, is given the prominence, co-ordination and exposure required, and positions the Health Board at the heart of local and regional health inequalities programmes.



Within North Wales, the pockets of deprivation are often masked by their proximity to more affluent areas. Consequently, although the rates of inequality in North Wales are lower than for Wales as a whole, there are distinct communities where health inequalities are a real and tangible issue. Specific community-based programmes are being developed in partnership with local communities and local agencies to develop a co-ordinated approach to meeting the needs of communities where health inequalities are an issue.

Well North Wales is leading on a series of place-based initiatives in Penycae (Wrexham), Upper Denbigh (Denbighshire) and Llangefni (Anglesey), based on the successful model, as well as supporting initiatives led by other agencies in each of the local authority areas across North Wales. More information, including published Annual Public Health Reports, can be found on the Public Health Wales website at: <http://www.wales.nhs.uk/sitesplus/888/page/63554>

## Examples of Good Practice

**The Learning Disability Care Bundles** were launched in 2014 by the Health Minister. They were developed to ensure early recognition of people with a Learning Disability, to ensure effective communication between the person, their family, carers and other health professionals, support patient centered care planning and help initiate effective review and safe discharge planning. The Health Liaison Team for BCUHB has been pivotal in providing training to wards in the 3 District General Hospitals (DGHs) to ensure the care bundles are utilised when a person with a Learning Disability is admitted. The team also regularly audits compliance rates with the care bundles. The Health Liaison team has recently appointed an interim matron for health liaison which will further raise the profile of people with learning disabilities, their health needs and how hospital services can ensure reasonable adjustments. BCUHB was the first Health Board in Wales to provide a dedicated liaison service for people with learning disabilities and this model is now being used across Wales as good practice. A BCUHB-wide policy has also been written for service users accessing mental health in-patient units.

**Addressing Health Inequalities Faced by People with Mental Illness.** The Uplifting Heart (Cynllun Codi Calon) service, which is the first of its kind in Wales, provides targeted support for more than 450 people in Gwynedd every year who suffer from enduring mental illness such as bipolar disorder and schizophrenia. Uplifting Heart provides a proactive screening service for diabetes and cardiovascular disease, along with targeted support to enable people living with mental illness to lead healthier lifestyles. Research has confirmed that people living with enduring mental illness die up to 20 years younger than the average population because of a range of factors which include their lifestyle and the side effects of their medication. People with enduring mental illness are also less likely to have their physical health needs identified, or to receive appropriate treatment for these. The service is delivered in all 24 GP surgeries across Gwynedd, and is led by a specialist nurse based at Ysbyty Gwynedd Hergest Mental Health Unit who provides training for primary care staff in 24 GP surgeries across Gwynedd on how to understand the physical health challenges faced by people living with enduring mental illness. The aim of the Uplifting Heart project is to provide a proactive, targeted approach to improving the physical health of service users by working collaboratively with them, their carers, community mental health teams and psychiatrists.

## Strategic Equality Objective 2 (Maps to BCUHB Strategic Goals 3, 4, & 5)

Improved patient access and experience: to improve access and experience for everyone, having regard for a person's protected characteristics with a focus on dignity and respect.

### Equality week

BCUHB held its first Equality Week in May 2016 to coincide with our annual celebration of International Day Against Homophobia, Biphobia and Transphobia (IDAHoBiT). A number of events were held during the week including short



ceremonies at each District General Hospital (see picture left at Ysbyty Glan Clwyd) to raise the rainbow flag on the 17<sup>th</sup> May coupled with visits to staff restaurant areas at the main hospital sites where we were joined by a range of internal and external stakeholders who worked with us to raise awareness of some of the barriers experienced by people with protected characteristics. We were pleased to be joined by:

- The Equality and Human Rights Commission
- North Wales Police
- North Wales Regional Equality Network
- North Wales Deaf Association
- Alzheimer's Society
- North East Wales Carers Information Service
- Victim Support
- Stonewall Cymru
- Unique Transgender Network

Health Board Vice Chair, Margaret Hanson, hosted a launch event where guests were given an outline of the plans for the week together with information on some of



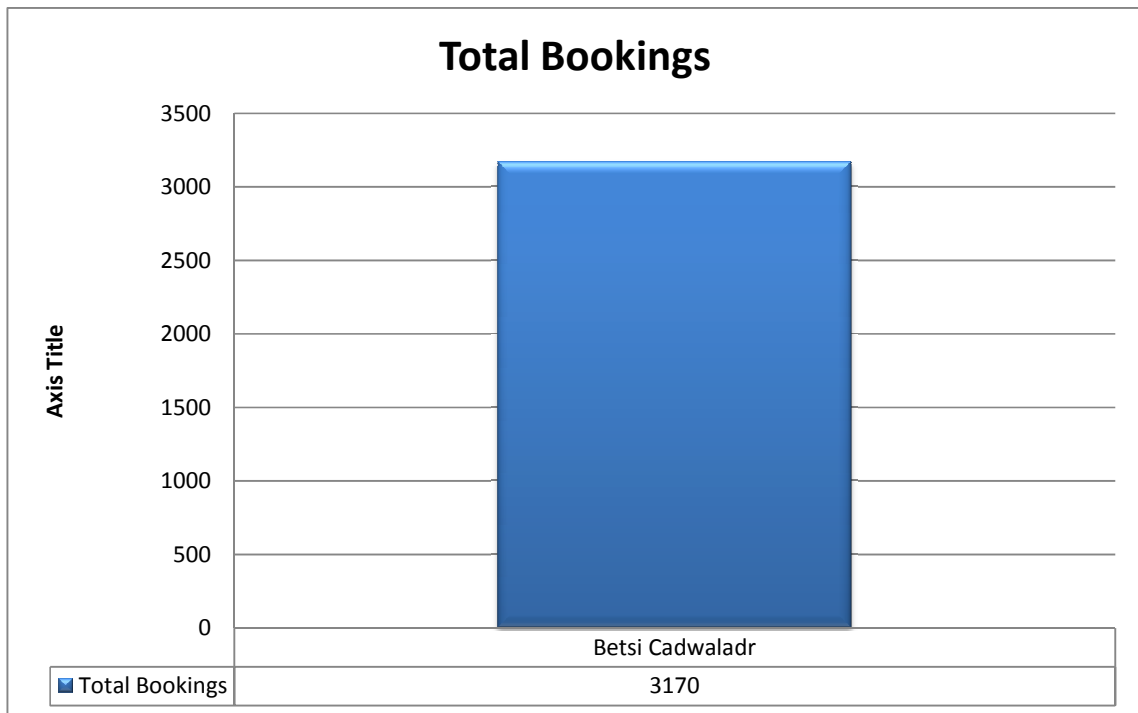
the equality-related projects under way within the Health Board. This included a joint presentation by BCUHB staff and representatives from UNIQUE transgender network, on work they are jointly undertaking to better understand the impact of dementia on older transgender people. And a presentation by the Head of Patient Experience on improvements made this year for patients with sensory loss. We received fantastic feedback on the

week's activities anecdotally from staff in the days following, and from service users visiting the hospitals that week.

### Minority Ethnic Elders Advocacy (MEEA) Project in North Wales

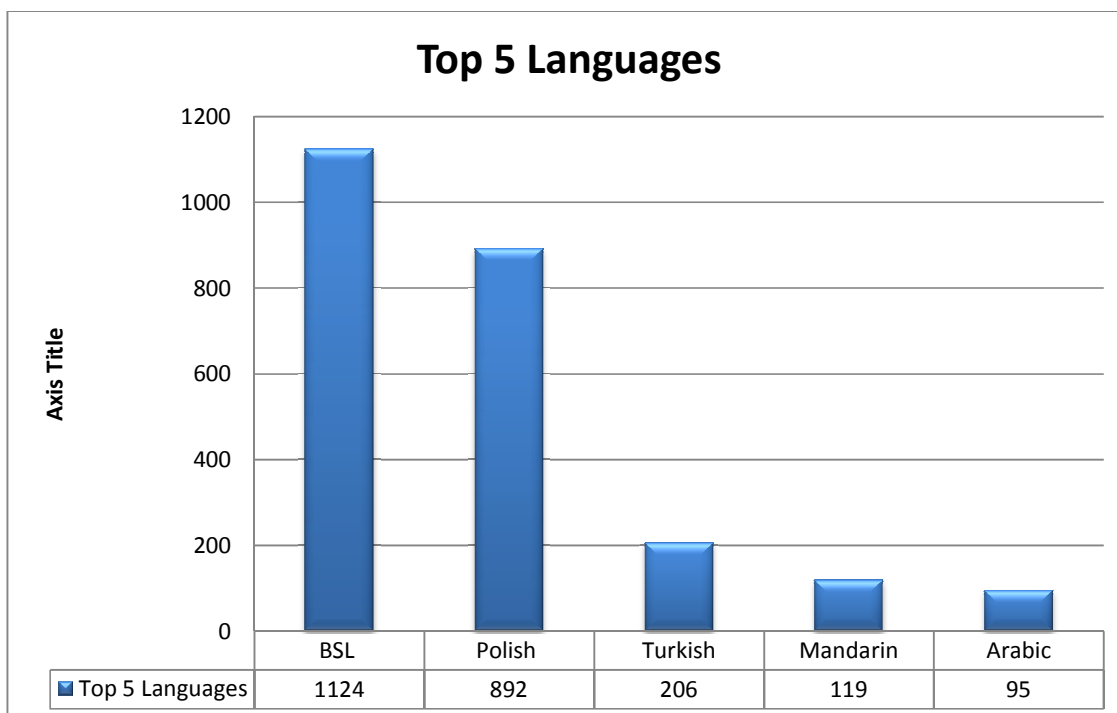
We have continued to meet with elders from minority ethnic groups across North Wales via the MEEA Project (a North Wales Regional Equality Network project with whom BCUHB work in partnership) to listen and learn about the barriers they experience in accessing services. A range of initiatives have been progressed including working with the Wales Interpretation and Translation Service (WITS) to offer interpreter training to the communities in North Wales. Statistics from WITS are shown below:

#### BCUHB Stats April 1<sup>st</sup> 2016 – March 31<sup>st</sup> 2017



#### Total Cost January 17 – March 17

Date	Amount
Jan-17	£38,833.62
Feb-17	£36,932.99
Mar-17	£34,964.08
<b>Total</b>	<b>£110,730.69</b>



### Patient Stories and Experience

‘Listening and Learning from the experience of individuals’ is one of our strategic objectives. Feedback from patients, carers and families helps us to identify service improvements, acknowledge good practice and thank staff on behalf of patients. We ask for feedback in a number of ways as laid out in the All-Wales Framework for Assuring Service User Experience. In addition a patient advice service is to be introduced this year., This will provide a listening and signposting service with the aim of providing a speedy response to queries raised by patients, families.

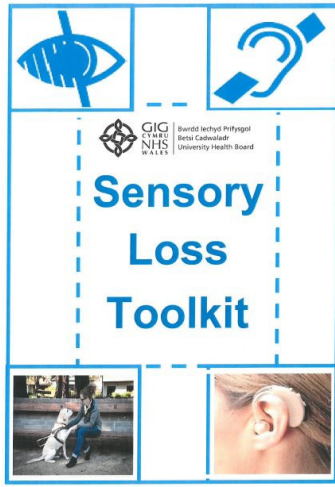
We were delighted when Jenny-Anne Bishop OBE agreed to record her own patient story for us to use within BCUHB to help raise awareness, particularly amongst front line staff, of the issues faced by transgender people in accessing health services across North Wales. She touched on a number of issues commonly experienced by trans service users including the use of pronouns (his, hers, him, her, they) and concluded by simply asking health staff to talk to trans people in the same way they would with any other patient, asking questions and listening are key to establishing a better understanding and delivering more effective health services to trans people.

### Accessible Healthcare

The All Wales Standards for Accessible Communication and Information for People with Sensory Loss reinforce the Health Board’s statutory duty under the Equality Act to meet the communication and information needs of people with sensory loss. Within this period the Health Board has appointed a Patient Experience Manager with specific responsibility for ensuring compliance with these standards and working with other health care managers to improve access to information and communication for patients and other service users with sensory loss. The Health Board is currently auditing its services and developing action plans to further improve the experience of service users with sensory loss in the coming year.

November 2016 was designated sensory loss awareness month and provided the focal point for the Health Board to work with voluntary organisations to raise the awareness of the needs for patients with sensory loss amongst front line staff and managers. Training for front line staff and managers is vital in ensuring that needs of people with sensory loss are met effectively and all Health Board employees are actively encouraged to complete the NHS Wales e-learning module on Sensory Loss, and sensory loss awareness is an important component of organisational and departmental induction programmes.

### **Sensory Loss Toolkit**



The 'Sensory Loss Toolkit' is a resource pack available in all wards, outpatient departments and other treatments areas to provide staff with easy to access guidelines on best practice in responding to the needs of patients with sensory loss. It was developed in collaboration with staff, service users and voluntary organisations with specific experience of the needs of people with sensory loss, and as such is an essential tool in improving services for patients with sensory loss. A version of the toolkit is currently being developed for use in community and primary care settings and will be piloted in these areas early in 2017/2018.

### **Older People**

This year saw the Health Board raising awareness of the Welsh Government Declaration of Rights for Older People in Wales and the United Nations Principles for Older Persons by holding a number of events in conjunction with a number of stakeholders that included North Wales Police, Victim Support and our own engagement officers. The events were organised in the run up to International Day of Older Persons on the 1<sup>st</sup> October, and one lunch time was spent at Ysbyty Gwynedd, Wrexham Maelor and Llandudno hospitals, where staff and visitors were invited to discuss a range of issues with those attending. The day's celebrations included a video message from the Vice Chair, the Head of Equality and Human Rights and a number of volunteers from across BCUHB.

### **Health Disability Sport Pathway**

Since 2014 Disability Sport Wales and the Health Board have teamed up to provide a new service that will help disabled people in North Wales improve their general level of physical activity and involvement in sport. The intention is to double the number of physically active disabled people in the region. The partnership supports staff within BCUHB to provide information and signposting to disabled people accessing health services, towards appropriate clubs, activities, or sports sessions which will help maintain or improve fitness levels and overall wellbeing, through increased participation and, where relevant, competitive opportunities. Work is also being undertaken within the surrounding sport sector to ensure that long-term partnerships are forged between health and sport organisations, securing the

sustainability of the project. The Posture and Mobility Service is very involved with Disability Sports Wales and promotes this service widely.

### **Understanding, Reflecting and Responding to Transgender Issues in Dementia Care**

Over recent years the Consultant Nurse for dementia and Vice Chair at BCUHB have attended listen and learn sessions with representatives of the older transgendered community. Concerns have been expressed about the appropriate care of older transgendered people and particularly those with mental health problems or dementia. Based on this work a reflective guide has been written for staff in partnership with activists from within the transgender community of North Wales who have challenged us to get the tone, language and content right. This is an important clinical tool which aims to raise awareness of transgender issues in relation to dementia care and offers a model for promoting effective and compassionate dementia care for trans people.

## Examples of Good Practice

**Ward 19, Dignity Team, Ysbyty Glan Clwyd** 'A small team of dignity champions has been set up on ward 19 to ensure dignity and respect is paramount in the team's everyday work. The team ensures all visitors to the ward including patients, relatives, staff and any others are treated as an individual. Our patients are elderly and many have dementia, live alone and can be isolated at home. The teams encourage engagement with relatives and support patients with any issues that arise. They advocate support for the elderly relatives working closely with dementia patients. They hold small group meetings to discuss common themes, any issues and how to ensure there is a zero tolerance to all forms of abuse on ward 19'

**Health Liaison Team, Wrexham** 'The Mental Health Liaison Nurse for Learning Disability has developed leaflets which provide accessible information for people with learning disabilities and mental health problems. Research carried out by the Foundation of Learning Disability Studies (2014) found that 100 per cent of service users questioned regarding their contact with mental services said that they had no written easy read information. As a result, the Health Liaison team agreed that this required addressing as part of making reasonable adjustments for people with learning disabilities. Extensive research showed that there was limited easy read documentation in English with none in Welsh. The nurse worked with service users to develop the leaflets and engaged a wide range of stakeholders including allied mental health professionals, service user forums, mental health leads, learning disability governance groups and learning disability psychiatrist peer group. The Welsh Government have published the leaflets on their website from October 2016. There were a number of drivers for developing the leaflets including Equality Act (2010), Independent Inquiry into access to healthy care for people with learning disabilities (2008) led by Sir Jonathan Michael.'

**West Area** 'The Engagement Team have undertaken a number of effective public engagement opportunities in communities and with partners. The links with communities are invaluable in connecting with people who have protected characteristics. These include engagement sessions with Age Well Centres in Gwynedd and Mon to discuss their issues with GP's and waiting list for hospital appointments; sessions with unpaid carers on Anglesey during their "Dementia support groups" to hear about issues in access to services and carers assessment and training. The local M.S.L.C (maternity support liaison committee) with their listening groups in Bangor, to listen to new mum's experience with our maternity care and how they cope after the birth of their child; and engagement with the local Secondary School in Blaenau Ffestiniog (with the local Schools Council) to raise awareness of the new CAHMS services in the new centre in Blaenau.'

**YGC Redevelopment** 'A further 3 refurbished wards were opened March 2017 which have more single rooms thus reducing the number of mixed-sex bays. We also now have the ability to provide en-suite accommodation, improving dignity and respect for patients who are transgender or are undertaking gender reassignment, for example.

Adult changing facilities are available as part of the refurbished transfer lounge. Mixed use toilets are available in the main public areas and accessible toilet facilities in the main public area. Service users have been involved and have been advised in regards to this work.'



**An Older Persons Ward at Wrexham Maelor Hospital** has been revamped to make it more dementia friendly.

The changes on the Morris Ward aim to make it more suitable for patients suffering with dementia.



Key areas of the ward such as bathrooms and toilets have now been clearly defined with primary colours to give patients a sense of place and create an environment that is easier to navigate.

The ward has also received a new security access system on all doors in and outside of the unit, as well the treatment room. It has also benefitted from new flooring, lighting and a call bell system and now boasts a new activities room where patients are able to socialise and play games.

**Involving Service Users in Recruitment** In East Area the Speech & Language Therapy Team are including patients, parents and third sector representatives in some clinical post recruitment exercises. Stakeholders have supported the team at both group and individual candidate exercises and interviews, and given feedback from a service user perspective of the qualities conveyed by the candidates, and what they would wish to see in prospective post holders. It has proved invaluable and staff have gained an increased understanding of service users and carers views as a result. This initiative represents a change to current practice and it is recognised that there are real challenges in moving from the current position to one where service user and carer involvement is achieved at all stages of the recruitment process, this is something the team hope to work towards based on feedback and success to date.

## Strategic Equality Objective 3 (Maps to BCUHB Strategic Goals 5 & 7)

Becoming an employer of choice: to be a fair and inclusive employer and build a workforce that is equipped to meet the diverse needs of our service users and colleagues, having regard for a person's protected characteristics.

### Stonewall Workplace Equality Index 2017



BCUHB participated in the 2017 Stonewall Workplace Equality Index and we retained our status as one of the “Top 100 Employers” in the UK. Pictured (left) are Celtic Pride member Chris Lube, and Equality Manager Mike Townson together with Board members prior to the March 2017 Board meeting where members formally acknowledged BCUHB's achievement in

retaining its “Top 100 Employer” status in the Stonewall Workplace Equality Index 2017.

We jointly sponsored the first Stonewall Straight Allies programme to be held across the public sector in North Wales. This was attended by a number of BCUHB staff and helped to widen awareness of the role of straight allies following the Chief Executive's message in his “My Week” earlier in the year.

### Celtic Pride


Celtic Pride is a network which supports staff who identify as lesbian, gay, bisexual, trans or who experience atypical gender identity. Celtic Pride works in partnership with the organisation to create a safe, inclusive and diverse working environment which encourages a culture of respect and equality for all, so everyone can reach their full potential without fear of discrimination. The Network worked in close partnership with the organisation this year to ensure we retained our status as one of the “Top 100 Employers” within Stonewall's Workplace Equality Index 2017.



The Network continues to meet every three months and welcomes new members whether they wish to attend meetings or not. The Network's objectives for the coming year include increased collaboration with other networks, including those at North Wales Police and Welsh Government.

We have also piloted a new Reverse Mentoring Programme at BCUHB where volunteers from Celtic Pride act as mentors for more senior staff, and we have been pleased with the progress made and the enthusiasm from our Chief Executive, Board Secretary and Director of Corporate Services.

We have been working closely with UNIQUE Transgender Network over the last 12 months to better understand the issues faced by trans people in employment.

Version: 1	 GIG GIG NHS WALES Iaustrad Iechyd Prifysgol Betsi Cadwaladr University Health Board		
<b>WP43</b>			
<b>GUIDELINES TO SUPPORT TRANSGENDER STAFF IN BCUHB</b>			
Date to be reviewed:	August 2018	No of pages:	30
Author(s):	Misr. Townsend	Author(s) title:	Senior Equalities Manager
Responsible dept / director:	Mr Martin Jones, Director, Workforce & Organisational Development		
Approved by:	Assistant Director – Employment Strategies & Practices		
Date approved:	November 2015		
Date activated (live):	December 2015		
Date EQA completed:	July 2015		
Documents to be read alongside this policy:	WP9 Equality, Diversity & Human Rights Policy WP42 Guidance on dealing with hate incidents / crimes against BCUHB employees		
Purpose of Issue/Description of current changes:	Adoption of good practice as recommended by NHS Wales Employers Unit		
First operational:	December 2015		
Previously reviewed:	date	date	date
Changes made yes/no:	Yes/no	Yes/no	Yes/no
<b>PROPRIETARY INFORMATION</b> This document contains proprietary information belonging to the Betsi Cadwaladr University Health Board. Do not produce all or any part of this document without written permission from the BCUHB.			
<small>WP43: Version: 1 Page 1 of 30          Paper copies of this document should be kept to a minimum and checks made with the electronic version to ensure the version to hand is the most recent.</small>			

We published a set of guidelines for trans staff working for the Health Board and members from UNIQUE attended our Equality Week in May 2016 to talk about a project they are undertaking with the Health Board to better understand the impact on older trans people who develop dementia.



## Staff Networks

We conducted a survey amongst staff during 2016/17 to scope the interest in the establishment of new staff networks in BCUHB. A short questionnaire was developed and published via Survey Monkey and we received a total of 86 responses. The key findings from this survey were:-

- Almost half of respondents indicated that they were aware of our existing staff network, Celtic Pride, however they did not necessarily understand what it was for.
- Almost 70% of respondents stated they would be interested in developing new staff networks, with a number of people who would also be prepared to help arrange and run meetings.
  - Suggested networks were for women, disabled staff and those from ethnic minority backgrounds.

## Gender Pay

We have been closely monitoring the work of the WAVE (Women Adding Value to the Economy) Project within Cardiff University to ensure the learning from their

research is incorporated into our action planning. More recently, we have been working with the WAVE Team to pilot a new Gender Employment and Pay Analysis (GEPA) tool which is helping to identify areas of the organisation where gaps in average pay exist.

Our work with the WAVE Project has also enabled us to better understand the causes of pay gaps and occupational segregation and to develop actions to address issues like improved awareness of the links between earnings and benefits where we have been working with local Citizens Advice staff (see also our ‘Gender Pay Action Plan’ in Appendix 2).

Although this work is still at an early stage, the initial results for BCUHB emerging from the GEPA tool are encouraging and indicate that Agenda for Change continues to deliver equal pay for work of equal value for staff employed under Agenda for Change Terms and Conditions. We plan to extend the use of the model to explore other areas of employment in the Health Board, as well as tackling other barriers faced by women in employment at the Health Board such as vertical and occupational segregation, particularly where evidence suggests, for example, barriers to progressing out of lower-paid, part time working.

Chart 1. Bar chart showing percentage of men and women in each pay band.

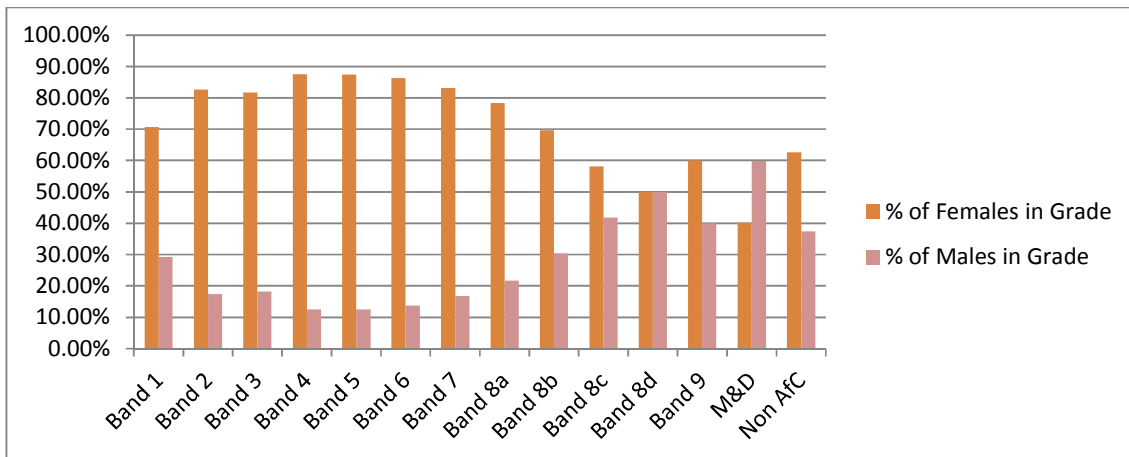


Chart 1 above shows an analysis (as at 31<sup>st</sup> March 2016) of each pay band and the percentage of men and women within each band. The general trend as the grades get higher (and therefore more highly paid) is for the proportion of women per grade to decline and for the proportion of men per grade to increase. This is known as vertical segregation.

### Women’s Focus Groups

One of the areas we were committed to exploring as part of our gender pay action plan was improved support for women in the organisation, including scoping support for a women’s network through a series of focus groups.

The first focus groups were held in Wrexham, Bangor and Abergele in the autumn of 2016 and were well attended. There are more groups arranged for 2017 at the request of community-based staff around the Dolgellau and Tywyn areas. Feedback

from those attending and others who were unavailable to attend was varied and included: issues arising from how managers apply/interpret Workforce policies, including Flexible Working, Special Leave and Annual Leave for Part Time Staff; the need for increased understanding in relation to help available to staff with caring responsibilities; challenges faced by some staff with caring responsibilities including those with both children/grandchildren and parents; facilities for staff returning from maternity leave who wish to continue breastfeeding; issues faced by some medical staff returning to work early following maternity leave. We will be progressing this work this year and will provide regular updates via the intranet page and staff bulletins as well as arranging further focus group meetings during 2017.

### **Step Into Work**

The Step Into Work programme recently introduced in BCUHB provides a systematic programme of opportunities for a range of people, including those who are furthest from the job market, young people, those in Black and Minority Ethnic groups, those with disabilities, those currently claiming job seekers allowance and those not in employment or education and training (NEETS). Through working in partnership with several key organisations in the region, BCUHB is committed to supporting people in to work programmes that have the potential to become sustainable work opportunities in the future.

The programme has been designed to offer volunteer work placements for all candidates who will follow the same pattern to ensure equality of opportunity across the organisation. All work placement volunteers will complete a 'passport' before commencing within BCUHB. Ensuring they are 100% compliant with the 10 All Wales Core Skills Training Framework, receive a full BCUHB Orientation programme, DBS (if required for the role), and Occupational Health clearance. This passport belongs to the candidate and will assist with future employability. They will then commence a 6 week placement in the organisation.

### **Time to Change Pledge/ Staff Mental Health Well-being**

We recently updated and approved our revised Staff Mental Health Well-being and Stress Management Procedure and this will be formally launched at our Workforce Conference on the May 16<sup>th</sup> 2017.

Planning has been taking place since November 2016 for the Counselling and CARE Team Mental Well-being Road Shows - the team will be travelling out to 22 Health Board sites in May 2017. This will be an opportunity to raise awareness around the updated procedure (above) and staff mental well-being. We hope to sign up staff Mental Well-being Champions to promote "Time to Change Wales" pledge which is a public declaration of our intention to step up and tackle mental health stigma and discrimination.

Mindful Employer – research has been carried out and information has been gathered and approved in March 2017 to enable BCUHB to sign the 'Mindful Employer Charter'. This means we are working towards meeting a number of

principles that demonstrate our commitment to improving the working lives of our staff who have mental health issues.

BCUHB is involved in “Health and Well-being NHS Wales Network.” Jack Jackson and Sarah Wynne-Jones from Occupational Health have attended meetings in Cardiff as part of a task group looking at All Wales Health and Mental Well-being, with representatives from other Trusts and Health Boards across Wales.

We have set up a Task and Finish group to explore critical incident debriefs and protocol across BCUHB – developing a strategy for responses and mental health support for staff before, during and after incidents.


### Flexible Working

Following the successful pilot sessions we ran in conjunction with Chwarae Teg in 2015, we have developed a proposal for a programme of workshops aimed at all managers across BCUHB, to be rolled out during the summer and autumn of 2017. The workshops, which are being delivered jointly, with support from trade union colleagues, will help to raise awareness of the processes around flexible working and will help managers to be able to respond more effectively to flexible working requests.

### Hate Crime

BCUHB has held discussions with Victim Support during the last few months with a view to establishing a pilot drop in centre. Victim Support is funded by Welsh Government to provide support to people affected by crime or traumatic events. They also run the national reporting facility for hate crime. We are exploring an offer they have made to run a 12-month pilot drop-in centre for BCUHB staff at one of the main hospital sites in North Wales and we have agreed that Wrexham would be a good place to run this pilot. The proposal will involve a dedicated Victim Support counsellor being available on a designated day each month during the 12-month pilot period.

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Betsi Cadwaladr  
University Health Board

**WP42**

**Guidance on dealing with hate incidents / crimes against  
BCUHB employees**

<b>Date to be reviewed:</b>	May 2018	<b>No of pages:</b>	8
<b>Author(s):</b>	Mike Townson David Baker	<b>Author(s) title:</b>	Senior Equalities Manager Violence & Aggression Case Manager
<b>Responsible dept / director:</b>	Workforce & Organisational Development		
<b>Approved by:</b>	Assistant Director – Employment Strategies & Practices		
<b>Date approved:</b>	May 2015		
<b>Date activated (live):</b>	May 2015		

<b>Date EQIA completed:</b>	April 2015
<b>Documents to be read alongside this policy:</b>	WP8: Equality, Diversity & Human Rights Policy WP5b: All Wales Dignity at Work Policy HS02: Procedure Guidance Protecting Employees From Violence and Aggression Tackling Hate Crimes and Incidents: A Framework for Action (Welsh Government) BCUHB Values and in particular "Valuing and respecting each other" All Wales Child Protection Procedures BCUHB POVA Procedures (Draft)
<b>Purpose of Issue/Description of current changes:</b>	Adoption of good practice and supports the implementation of the Welsh Government Framework for Action on Tackling Hate Crimes and Incidents

<b>First operational:</b>	May 2015										
<b>Previously reviewed:</b>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td>date</td> <td>date</td> <td>date</td> <td>date</td> <td>date</td> </tr> <tr> <td> </td> <td> </td> <td> </td> <td> </td> <td> </td> </tr> </table>	date	date	date	date	date					
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One of our equality objectives is that we aim to be an “Employer of Choice”. This is designed to help the Health Board recruit and retain high quality staff in the right place at the right time, and one of the outcomes we are committed to is:-

***When at work, staff are free from abuse, harassment, bullying and violence from any source.***

We believe this initiative will contribute to this objective by providing staff with additional support where they are reluctant to access other internal support measures, for example within Occupational Health & Wellbeing.

Following the referendum vote to leave the European Union, we received reports of some staff originally born outside of Britain receiving abuse and negative comments from patients and hospital visitors.

In a show of support for our non-UK staff, we organised our inaugural “International Day” on September 14th. The day’s celebrations included a video message from our Chief Executive expressing his gratitude to the efforts of all of our staff, including those originally born outside of the UK, and a press release featuring information about the contribution our international staff make. We also recorded a series of videos of staff of different nationalities talking about their work in North Wales – why they enjoy living and working here, and how they help care for people in the area.

We received fantastic feedback on the day’s activities both anecdotally from staff in the days following the event, and from members of the public in reaction to our activity on social media. The suite of 9 videos received more than 10,000 views on Facebook, as well as a significant number of shares and likes from social media users.

We also issued a quiz to all in-patients on the day, which included messaging at the top along the lines of “we value and respect all of our staff, including those born outside the UK, and that we won’t tolerate abuse of our staff in any way”. In total, this was issued to approximately 4,000 people.

## **Training**

The Corporate Equalities Team is responsible for designing and delivering mandatory equality and human rights training for all staff across BCUHB. We have a number of different training solutions designed to enable all staff to access the training in a method that suits their own circumstances best.

This is the first full year that our training has been based upon the All Wales e-learning package known as “Treat Me Fairly” (or TMF). In addition, BCUHB developed a workshop presentation using resources from the TMF package that has been shared with NHS colleagues across Wales. It is this workshop that we deliver during Corporate Mandatory Training Days which are held at the three main hospital locations every month.

Latest statistics available show that as at the 31<sup>st</sup> March 2017, the overall compliance rate for Equality & Human Rights training has risen to 67% (from 47% as at 31<sup>st</sup> March 2016).

We have also delivered a number of additional, ad hoc training sessions based upon the TMF workshop including a number of sessions arranged with Mental Health and Learning Disabilities Directorate. Their compliance rate as at the 31<sup>st</sup> March 2017 stands at 77.3%.

Staff employed within the Estates team have limited access to computer facilities to undertake e-learning packages. They also often work unsocial hours or unusual work patterns which limit their ability to access mandatory training. We therefore undertook to explore more innovative ways of helping staff gain the necessary understanding around equality and human rights and worked with managers in Estates to develop a workbook-based approach to equality training. Following a short pilot exercise, the book is now in use across the Estates Directorate. Staff are handed a copy of the workbook and provided with protected time to read through it and answer a number of questions. Line managers then ensure that at least 75% of the questions are answered correctly before e-mailing training colleagues to confirm satisfactory completion so that training records can be updated. As at the 31<sup>st</sup> March 2017, training compliance for equality and human rights within Estates has risen to 35% (compared to 12% as at 31<sup>st</sup> March 2016).

Staff employed by Primary Care contractors such as GPs and dentists have access to the Treat Me Fairly e-learning training package. However for the first time this year, we have extended the offer of face-to-face training to GP practices across the Health Board. A number of these sessions have now been completed and the feedback has been consistently excellent. It is planned to continue to roll out this training over the coming 12 months. We will also be exploring with staff in the Primary Care Support Unit how we can reach the much smaller organisations typified by dental practices and community pharmacists.

Table 2: Mandatory Equality & Human Rights Training Compliance

<b>Measure:</b> Numbers (and %) of staff who have completed mandatory equality training	West Area	Central Area	East Area	Secondary Care	Mental Health and LDS
(figures shown as at 31 <sup>st</sup> March 2017)	1,162/1,545 ▲ 76.7%	1,340/1,891 ▲ 71.9%	1,350/2,091 ▲ 65.7%	5,564/8,151 ▲ 69.3%	1,446/1,871 ▲ 77.3%
(31 <sup>st</sup> March 2016)	53%	54%	42%	45%	58%

### A Step into Management (ASiM)



ASiM is a new learning programme designed to equip managers, team leaders and supervisors in BCUHB with the core skills required to effectively manage staff and services. The programme is aimed at newly appointed managers, team leaders and supervisors who have managerial responsibility for staff or services as well as existing managers, team leaders and supervisors who recognise areas for



development in their own practice. Equality Impact Assessment training is incorporated within the programme.

### **Staff Survey Results Dignity and Respect**

The NHS Wales Staff Survey was conducted in the autumn of 2016 and aimed to:

“..provide a full analysis of workforce engagement and the organisational climate for the NHS Wales workforce, giving an overall assessment of areas that require improvement.”

When asked about their health and well-being at work, this is what our staff said:

12% of staff say that they have experienced physical violence at work from patients/services users, their relatives or other members of the public (11% in 2013) – all Wales 11%

58% say that their organisation takes effective action when this happens (56% in 2013) – all Wales 61%

17% of staff say that they have experienced harassment, bullying or abuse (HBA) at work from patients/services users, their relatives or other members of the public (18% in 2013) – all Wales 16%

17% have experienced HBA from their manager/team leader or other colleagues (19% in 2013) – all Wales 15%

53% say that their organisation takes effective action when HBA is from the public (49% in 2013) – all Wales 56%; and 48% from members or staff (45% in 2013) – all Wales 51%

77% of staff say that their line manager treats them with respect (74% in 2013) – all Wales 80%

There have been improvements in most scores, and the Health Board is on or just below the all Wales average for most scores in this section.

An improvement action plan will be presented to the May 2017 Board meeting.

### **Strategic Equality Objective 4 (Maps to BCUHB Strategic Goals 4, 5, 6 & 7)**

Inclusive leadership at all levels: to provide the vision and motivation to advance equality at BCUHB and harness the energy and efforts of others to make improvements.

**Our updated Strategic Equality Plan 2016-2020** was agreed at Board in March 2016 and published on our website. This includes a joint commitment from our Chair, Chief Executive and Independent Board Member Equality Champion that states:

“As a Board, we will work to ensure that our statutory obligations to deliver the Public Sector Equality Duty are understood and discharged. We will continue to scrutinise implementation of this Strategic Equality Plan agreed by our Health Board in December 2015 and will strive to ensure that our organisation provides a fair, responsive, inclusive and accessible service for all.”

**My Week** Chief Executive Gary Doherty publishes a weekly newsletter (“My Week”) that has included many positive key messages in relation to equality and human rights throughout year. An example is how he declared himself a straight ally, reinforcing a key message about supporting LGBT colleagues in the workplace. He said:

**“I’m a straight Ally”** In conversation with colleagues I learnt about the idea of Straight Allies and I’m delighted to be one! Straight Allies can really help play a critical role in creating gay-friendly workplaces, helping to advance the fair treatment of their lesbian, gay and bisexual staff. Their involvement – often precisely because they’re not gay themselves – can have a transformative effect on the culture of an organisation and the workplace experience of staff, both gay and straight”.



**Staff Achievement Awards** The Awards recognise the commitment and dedication of individuals and teams to the Health Board and people of North Wales. The Advancing Equality Award this year was won by Simon Meadowcroft. Simon is the only learning disability mental health liaison nurse in Wales and was recognised for his work to develop accessible information for people with learning disabilities.

**Proud to Lead Framework** Has been published this year, it sets out how each and every one of us are leaders within our roles irrespective of our job titles, and that we have a responsibility to lead by example. The Proud to Lead Framework (appendix 3) provides guidance on what we will and what we will not do in relation to certain competencies which are:

- Personal qualities and values,
- Leading and developing individuals
- Leading & developing the organisation and
- Leading the way forward

**Board Development** The Head of Equality and Human Rights and Assistant Director of Health Strategy jointly facilitated a Board Development Session in October 2016 which focused on the Equality Duties and in particular governance of equality impact assessment and the approach to the development of the Living Healthier Staying Well Strategy.

## **Equality and Human Rights Governance at BCUHB**

The diagram in Appendix 1 illustrates the reporting structures and governance for Equality and Human Rights within BCUHB. A summary of the work of the key committees and groups during 2016/17 is provided below.

### **Equality and Human Rights Strategic Forum (E&HRSF)**

This is our overarching forum and the Group's role is to advise the Health Board in relation to the strategic direction for equality, diversity and human rights, for both employment practice and delivery of patient care.

The Forum met four times during the year and key topics identified as "Issues of Significance" were communicated to Area, Secondary Care and Mental Health Directors following each meeting. These included:-

- Implementation, Accountability and Performance Management of Strategic Equality Plan (SEP)
- NHS Wales Planning Framework
- Assurance of how the equality duties are considered in Project Management Office (PMO) processes
- Well- being of Future Generations (Wales) Act 2015 and Equality
- Learning Disability Care Bundles
- Hate Crime and BCUHB Activity
- Revised EqIA Guidance and Procedure
- Flexible Working Policy and Procedure
- Supporting Employees to Continue Breastfeeding on Return from Maternity Leave
- Staff Mental Health and Wellbeing Procedure
- Equality Week 2016
- Disability Confident Scheme

### **Equality Operational Group (EOG)**

The Equality and Human Rights Operational Leads work with the Strategic Equality Leads for their Division to drive the local implementation of divisional equality actions arising from the Health Board's Strategic Equality Objectives and Strategic Equality Plan (SEP) . Operational leads work to support the implementation and dissemination of equality and human rights initiatives. The group met on four occasions last year, and the key agenda items were as follows:-

- Equality Weeks May 2016 and 2017
- Strategic Equality & Human Rights Plan 2016-20
- Equality Impact Assessment
- Stonewall Workplace Equality Index
- Staff Networks and Questionnaire
- International Day of Older Persons
- Accessible Healthcare Toolkit
- Hate Crime Awareness Week 2016

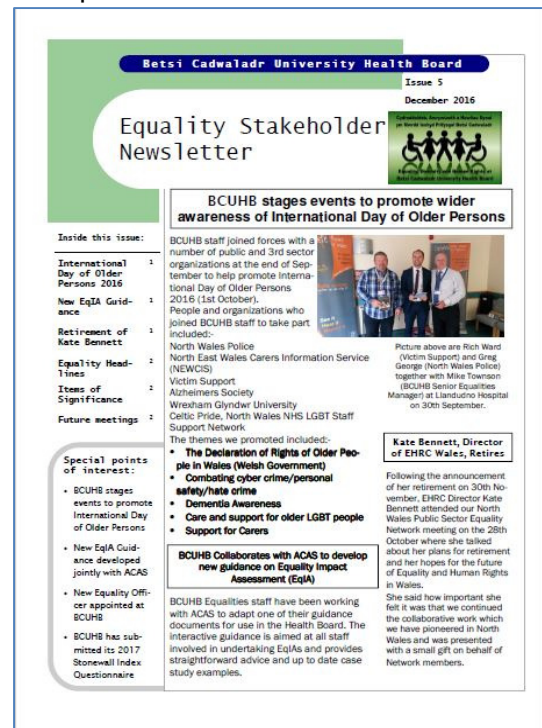
- Building Capacity within Divisions
- Building Equality and Human Rights Considerations into Service change
- Equality Training for Primary Care

## Equality Stakeholder Group (ESG)

This Group comprises of individuals and third sector organisations who have agreed to work with us to help scrutinise and inform our on-going equality and human rights work across all protected characteristics and includes a specific focus on the barriers experienced by disabled people. Our ESG members work with us to provide expertise on an on-going basis. Group members identify key priority areas for discussion and therefore determine meeting agendas. The topics they have identified for discussion during the year from April 2016 to March 2017 have included:

- Health Screening (Public Health Wales)
- Hate Crime
- Living Healthier, Staying Well
- Approach to the development of the draft Mental Health Strategy
- Primary Care and GP cluster working

Every six months, we produce a short newsletter which is distributed to ESG members and helps to provide information on current BCUHB equality and human rights activities and other items of interest including future meetings and agenda items.



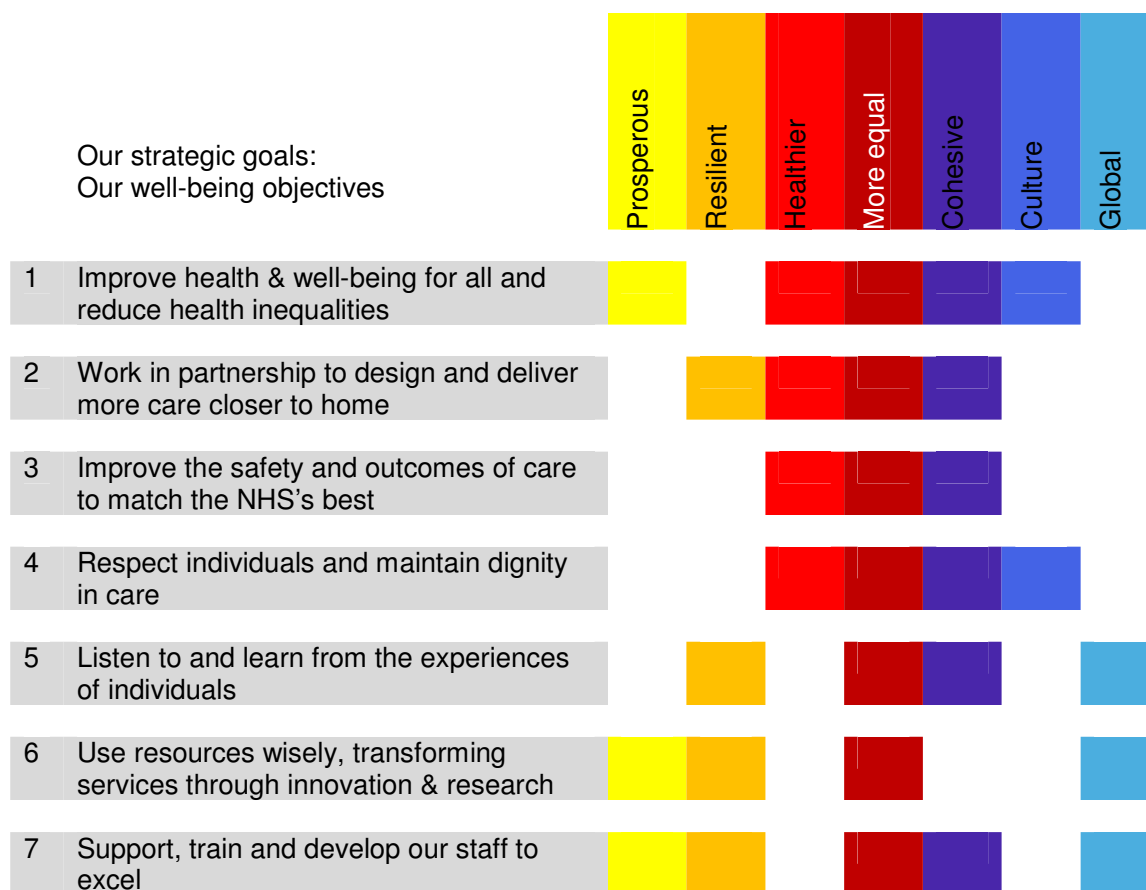
**Strategy & Planning Equality Scrutiny Group** This group, which comprises both internal and external stakeholders, continued to meet during 2016/17. The group was established to provide scrutiny and advice in relation to the equality impact assessments being carried out on emerging key BCUHB strategies and policies. There were four meetings during the year and the following strategies and policies were considered by members:-

- Annual Operating Plan
- Approach to development of our strategy for healthcare in North Wales Living Healthier Staying Well ( LHSW)
- Approach to the draft Mental Health Strategy
- Draft Engagement Strategy
- Outpatients Strategy and Vision

# Focus for the Future

## The Well-being of Future Generations (Wales) Act 2015

From April 2016, the Well-being of Future Generations (Wales) Act 2015 came into force with major implications for the Health Board and the way that we carry out our business and plan for the future. The Act requires all public bodies to change the way they work in order to improve well-being for the whole population, by acting in accordance with the sustainable development principle and meeting the 7 Well-being Goals. Sustainable development connects the environment in which we live, the economy in which we work, the society which we enjoy and the cultures that we share to the people that we serve and their quality of life. Working in this way means we can better meet the needs of our present population without compromising the ability of future generations to meet their own needs. Considering the requirements of the Act we have assessed how our existing organisational goals align with the 7 Well-being Goals and determined that they provide a sound framework. The 'More Equal Wales' wellbeing goal is relevant to all.



The implementation of this Act and also the Social Services and Well-being Act will require a significant cultural and behavioural shift within the Health Board, especially in relation to the way we work with the public we serve and with our partners. Both, however, represent a significant opportunity to create the conditions in which we can

improve the well-being of both current and future generations in North Wales. The Equality Act 2010 (Statutory Duties) (Wales) Regulations 2011 and Strategic Equality Plan are one of the existing mechanisms for action. The 2015 Act requires specified public bodies to reflect the diversity of the population in applying the involvement part of the Sustainable Development principle. This helps to ensure the interests of groups with protected characteristics are actively considered in the setting and achieving of well-being objectives. Engagement with protected characteristic groups and the outcomes of equality impact assessment will be drawn on by the Health Board in fulfilling our requirements under the Act where relevant.

This section outlines some of the challenges we have met in relation to our equality objectives, and what we plan to do to move the agenda forward.

## **2017/18 Actions**

### **Living Healthier Staying Well**

Working with the Strategy and Planning Equality Scrutiny Group we will build upon the work to date and offer guidance to the Living Healthier, Staying Well Programme Group, developing the strategy for the future health of North Wales, to advise that equality and human rights are properly considered and influence decision-making.

### **Rights**

We will focus on raising awareness of the rights of children, disabled people and older people in Wales in accordance with UN Conventions and the Welsh Government Declaration of Rights for Older People in Wales this year.

### **Service User Experience**

We will raise awareness of barriers experienced by LGBT people when accessing and using services and raise awareness of the model care pathway for trans people.

This year we have been working to strengthen equality information gathered as part of patient experience feedback. The Patient Experience Team has been gathering and analysing available equality information as part of their ongoing data collection systems and processes. This will be further developed over the coming year.

### **Implementation and performance Management of the Strategic Equality Plan**

Progress has been made, strategic equality leads from each of the five directorates have been nominated and coached and are now members of the Equality and Human Rights Strategic Forum. However, we need to build upon this to further strengthen performance management of the SEP this year through the BCUHB Accountability & Performance Management Framework.

### **Impact Assessment**

Equality Impact Assessment Procedures have been reviewed and published this year. We will drive forward application of Equality Impact Assessment (EqIA) to inform decision making in regard to protected characteristics, and Human Rights and and strengthen the governance of EqIA this year.

## **Staff Training**

Training in equality and human rights remains a priority. Whilst training numbers have increased significantly, we need to develop more innovative ways of making training more accessible. A key focus for the coming year will be to facilitate greater access to equality training for staff working in Primary and Community care including those employed within GP Practices.

## **Conference**

We will host a workforce conference to build capacity and understanding with managers that will raise awareness of the Stonewall Workplace Equality Index and we will explore areas of employment policy and practice that embed equality and inclusion into our culture, raise awareness of the Disability Confident Employer Scheme, and increase understanding of the barriers experienced by disabled people in work and how to make reasonable adjustments, and raise awareness about mental wellbeing for individuals and teams.

## **Gender Equality**

The scope of the work in understanding more about the factors that have given rise to differences in average pay between men and women working for BCUHB is extremely challenging and it is expected that securing any tangible change in the short term will be similarly difficult to attain. Factors such as occupational segregation, which can be attributed, at least in part if not substantially, to societal issues and attitudes about male and female roles/occupations, may take generations to effect substantial change. We will be working to progress this work via our Women's Focus groups this year.

## **Hate Crime**

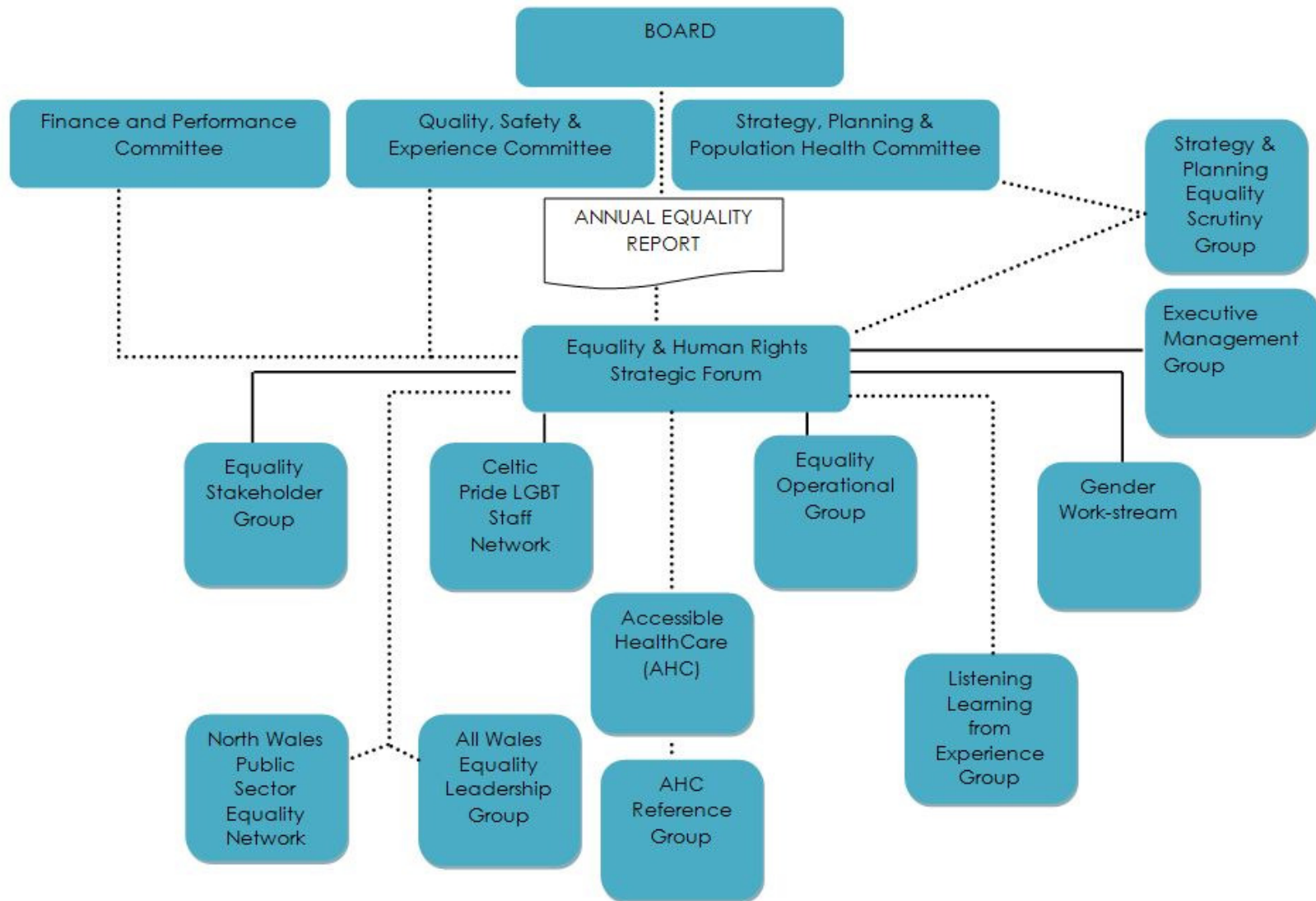
We will continue to raise awareness to ensure staff recognize and act on incidence of hate crime and evaluate the drop in service facilitated by Victim Support.

## **Disability Confident**

We will implement the Disability Confident Employer Scheme and seek to attain Disability Confident Leader status.

## Appendix 1: Equality & Human Rights Governance

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## Appendix 2: BCUHB Gender Pay/Flexible Working Action Plan

Objective	By Who	By When	Status/Progress/ Update
<p>Improve support for women by:</p> <ul style="list-style-type: none"> <li>Running a series of focus groups and scoping a women's staff network</li> <li>Developing mentoring schemes for women</li> <li>Improving the support available for staff with caring responsibilities</li> </ul>	<p>ED&amp;HR Team</p> <p>Emplmt Practices Team</p>	<p>Dec 2016</p> <p>June 2017</p>	<p>Three groups held Oct-Dec 2016 and a further two arranged for community staff in Dolgellau and Tywyn in May 2017.</p> <p>Draft Carers Policy Developed awaiting approval</p>
<p>Tackle gender stereotyping in schools curricula and careers advice by:</p> <ul style="list-style-type: none"> <li>Working with Chwarae Teg and local public sector partners</li> </ul>	<p>ED&amp;HR Team</p>	<p>Dec 2017</p>	<p>Included in North Wales Public Sector Equality Network Action Plan 2016/17</p>
<p>Improve awareness of, and access to, Flexible Working across BCUHB and monitor uptake by:</p> <ul style="list-style-type: none"> <li>Implementing the recommendations approved by the Equality and Human Rights Strategic Forum and the Local Partnership Forum</li> </ul>	<p>ED&amp;HR Team</p>	<p>Dec 2017</p>	<p>Draft proposals for manager workshops commencing Autumn 2017 were agreed by the Equality &amp; Human Rights Strategic Forum in March 2017.</p>
<p>Improve understanding of the factors that give rise to, and sustain gender pay gaps by:</p> <ul style="list-style-type: none"> <li>Implementing the WAVE Gender Employment &amp; Pay Analysis model</li> </ul>	<p>WfIS Team</p>	<p>Dec 2016</p>	<p>WAVE Gender Employment and Pay Analysis (GEPA) Model has been piloted in BCUHB in Nov 2016 and initial results included in narrative above.</p>
<p>Monitor the impact of changes to Agenda for Change Terms and Conditions on Gender Pay Gaps by:</p> <ul style="list-style-type: none"> <li>Monitoring the impact of recent changes to Agenda for Change</li> </ul>	<p>WfIS Team</p>	<p>Dec 2016</p>	<p>No progress to report to date.</p>

# Appendix 3: Leadership Values



Bwrdd Iechyd Prifysgol  
Betsi Cadwaladr  
University Health Board

### Personal Qualities & Values

<p><b>I will:</b></p> <ul style="list-style-type: none"> <li>● Always act in accordance with and champion the organisation's values</li> <li>● Always challenge bad behaviour and actively manage poor performance</li> <li>● Be professional and maintain optimism in stressful situations</li> </ul>	<p><b>I will not:</b></p> <ul style="list-style-type: none"> <li>● Act in a way which compromises the organisation's values</li> <li>● Ignore bad behaviour or accept poor performance</li> <li>● Lose my professionalism when in stressful situations</li> </ul>
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**Personal Qualities & Values**

### Leading & Developing Individuals

<p><b>I will:</b></p> <ul style="list-style-type: none"> <li>● Always act in the best interest of the patient / service user</li> <li>● Consistently deliver on promises</li> <li>● Always demonstrate a can do attitude</li> <li>● Recognise and praise effort, not just achievements</li> <li>● Always encourage individuals to look for ways to improve the service</li> </ul>	<p><b>I will not:</b></p> <ul style="list-style-type: none"> <li>● Act in a way which gives little or no consideration to the needs of patients and service users</li> <li>● Over promise and under deliver</li> <li>● Be in the background and demonstrate lack of ownership</li> </ul>
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**Leading & Developing Individuals**

## Proud to Lead

### Leading & Developing the Organisation

<p><b>I will:</b></p> <ul style="list-style-type: none"> <li>● Share stories of success that create pride in achievement</li> <li>● Champion a mindset of high ambition for individuals, the team and organisation</li> <li>● Lead by example, be compassionate and aspire to excellence</li> <li>● Always take proactive steps to develop team members</li> </ul>	<p><b>I will not:</b></p> <ul style="list-style-type: none"> <li>● Set unclear objectives and targets</li> <li>● Tolerate mediocrity and make excuses for poor or variable performance</li> <li>● Give unbalanced feedback (too much praise or too little)</li> <li>● Emphasise what is going wrong rather than what is going well</li> <li>● Ignore the development needs of my team</li> </ul>
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**Leading & Developing the Organisation**

### Leading the Way Forward

<p><b>I will:</b></p> <ul style="list-style-type: none"> <li>● Look at and emphasise the opportunities when difficulties arise</li> <li>● Always listen to the view of others to develop joint solutions</li> <li>● Involve team members in planning and delivering service change</li> <li>● Engage with staff, internal and external stakeholders and the public</li> </ul>	<p><b>I will not:</b></p> <ul style="list-style-type: none"> <li>● Push forward my own ideas and ignore the views of others</li> <li>● Exclude the team from planning service change</li> <li>● Accept a culture of non-cooperation and negativity</li> <li>● Fail to engage appropriately with staff internal and external stakeholders and the public</li> </ul>
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**Leading the Way Forward**

#BCUHB Proud

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