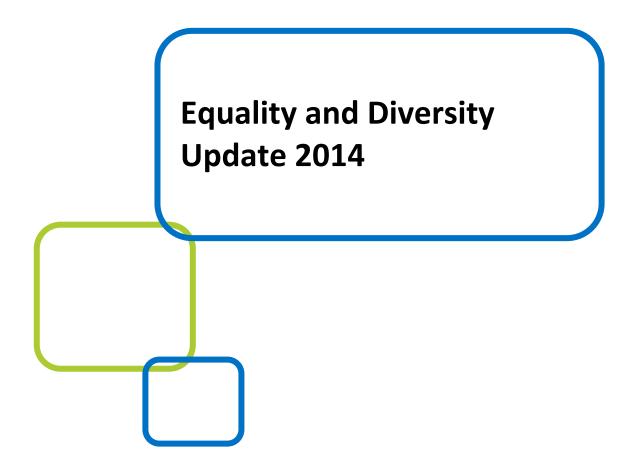
The Robert Jones and Agnes Hunt MHS Orthopaedic Hospital

NHS Foundation Trust



Delivering Outstanding Patient Care

January 2014

Equality and Diversity Annual Update 2014

Foreword

Welcome to the first Equality and Diversity annual update produced by the Trust.

The aim of the update is to inform patients, public, Foundation Trust (FT) Members and staff of the work we have undertaken to promote and support equality at the hospital. It also shows the areas we will be focussing upon in the coming year.

The Trust uses the NHS Equality and Delivery System (known as the EDS) as the basis for delivering better outcomes for patients and communities and better working environments for our staff, which are personal, fair and diverse.

As part of the EDS, we are encouraged to talk to and listen to our local community to help develop our services, and we do this through our foundation trust membership and elected governors.

We would like to encourage members of the public to become Foundation Trust members, especially people from Black & Minority Ethnic groups. If you would like to join you can do so by

- Completing our Online Form which can be found at our website <u>www.rjah.nhs.uk</u>
- By telephone on: 01691 404394
- By email: FT@rjah.nhs.uk

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Ruth Tyrrell, Associate Director of Human Resources

Our aims and objectives in 2013

The equality objectives for 2013 were split across the following four goals set out in the EDS, which were

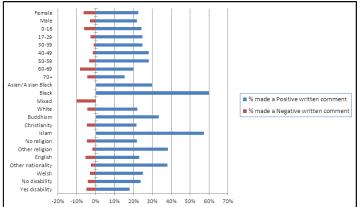
Goal 1 Better health outcomes for all Goal 2 Improved patient access and experience Goal 3 Empowered, engaged and well-supported staff Goal 4 Inclusive leadership at all levels

Goal 1 Better health outcomes for all

We decided to focus on ensuring that Patients' health needs are assessed, and that services were provided in appropriate and effective ways.

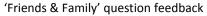
Unfortunately, the trust was not previously collecting enough equality information about patients, so our aim was to increase information and act upon it through the collection of evidence from groups with protected characteristics via Patient Advise and Liaison Services (PALS), patient comment cards and the net promoter or Friends and Family' question and act upon the results.

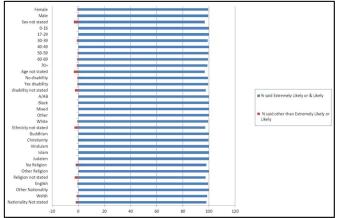
Patient Comment Card Feedback



We have now been collecting this information regularly and you can see from the table that feedback for the 6 months up to September 2013 from patients across these groups shows that our services are positively received across all ages, disability, sexes, religions and Black & Minority Ethnic groups, other than mixed race who did not report positive any comments.

All negative comments are reviewed and where appropriate action taken and positive comments are also fed back to staff.





The Friends and Family Test, is based on a single question; "How likely would you be to recommend our ward to friends and family if they needed similar care or treatment." Again, as can be seen from the table the majority of patients from all protected characteristics report that they would recommend the trust, but most of those who said they would not recommend the trust, did not give information about their backgrounds. We will continue to collect and monitor this data and use it to help us identify any changes in the experiences of patients from these groups.

The trust intended to use the FT elected public governor and member networks & patient surveys to further understand health needs of groups and take action. Unfortunately, this was not done in 2013 and therefore this objective will be rolled forward into 2014.

An area where we made significant progress was in the promotion of well-being to all protected groups through well-being events and health promotion messages in our outpatient clinics.

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		mbership Eve	nt			
eelii	ng Younger	for Longer				
		10.00am until 3.00pm / Confere				
The Rober	rt Jones and Agnes Hu	nt Orthopaedic Hospital NHS Fo	undation Trust, Oswestry, SY10 7AG			
	lay offering support an		NHS Foundation Trust are invited to ourself as you grow older, especially			
healthy b	ones and joints	Not a member of the Trust	7			
keeping		No problem, just turn up or				
managin		Membership is FREE and o	ives you access to events like this			
		and NHS Discounts, as well as information from the Trust on				
life style o	changes	and NHS Discounts, as well	as information from the Trust on			
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In 2013 the Trust held its first FT Public Member health event, aimed at older people, which was attended by 100 members of the public. The Trust also participated in a national initiative called 'Making Every Contact Count' in which staff were trained in how to give positive messages to patients and public about improving their health and well-being. A key objective the trust set itself to support better health outcomes for all, was to focus our own resources towards assisting patients who require support due to dementia

The trust participated in national dementia awareness week and staff were encouraged to complete dementia training and undertake screening for patients over 75yrs.

A review of the patient environment from a dementia perspective was undertaken to reduce the potential to confuse or disorientate patients with dementia, when coming into the hospital. This included a 'Way Finding' audit/review which has resulted in a completely new approach to signage in the hospital, which will be replaced in 2014.

Not forgetting our own staff, the trust also undertook its annual health and wellbeing day for staff which was attended by 430 staff, which was the best attendance we have ever had at the event.



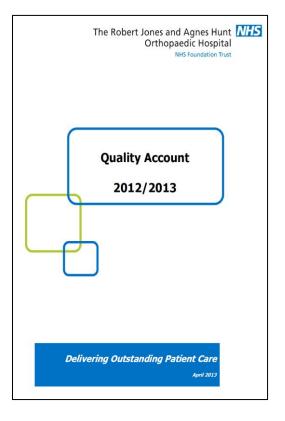
Goal 2 Improved patient access and experience

Each year the trust publishes its quality accounts, which gives details of all aspects of care provided to all patients.

Within 2013 the trust has seen significant improvement in waiting times, with all three national targets for waiting times being met.

The trust set specific initiatives to support the patient experience through 2012/13, these included redesigning the patient pathway in order to provide a smooth transition through the whole episode of care, including:

- A well-defined outpatient clinic process
- An efficient pre-operative assessment
- Clear defined length of stay in hospital supported by clear goals and post-operative support
- Smooth discharge process that includes patient and family involvement



A review of processes within outpatients and pre-op was undertaken and a number of changes were made:

- The information provided to patients in letters and booklets was revised, in line with feedback from the Patient Advice and Liaison Service.
- The system for recording patients' BMI was changed to ensure that patient privacy and dignity was maintained at all times.
- Commenced a modernisation agenda in Healthcare Records to build on the work, refining systems and processes
- The staffing structures were reviewed to ensure continuity for patients and a clear line of reporting
- The drugs storage was improved in outpatients and staff underwent further training.

The Joint School was reintroduced in 2012/13 with the aim of providing patients with clear information about what to expect post-operatively, thereby reducing the length of stay.

Other work has focussed on admission and discharge planning, looking at how long patients stay at the hospital and ensuring they are being given clear information about their estimated discharge date. This work continues into 2013/14.

In the National Inpatient Survey, the Trust had improved scores for a number of questions relating to discharge, showing that overall, the patient experience has improved. The average patient satisfaction scores (patients rating the care as excellent or good) were 90.28% for Pre-op and 75.13% for outpatients.

The Friends and Family test, which has been referred to earlier, is a simple, comparable test which, when combined with follow-up questions, can be used to drive cultural change and continuous improvements in the quality of care received by NHS patients.

Maintaining the Trust performance for the 'Friends and Family Test" in the top 25% of Trusts was a priority in 2012/13, which was maintained. Responses from patients have been very positive and the Trust has succeeded in maintaining an average score of 88.6. The score is based upon the number of positive scores minus the number of negative scores.

In addition the Trust receives regular feedback from patients utilising the information both positive and when issues of concern are raised to ensure systems and process are reviewed in order enhance the patient experience in the future

Goal 3 Empowered, engaged and well-supported staff

In 2013 the Trust undertook an Equal Pay Audit using an audit process developed for the NHS, in partnership with the trusts Staff-side representatives.

There were no issues identified from the audit primarily because the Trust has not moved away from national terms and conditions for staff.

As part of the equal pay work, the trust also reviewed the job banding and job evaluation system. Again, the trust applies nationally agreed banding and job evaluation processes, however in 2013 work was undertaken with staff side representatives to reduce maintain consistency of job banding whilst at the same time reducing the bureaucracy involved for both staff and managers.

The trust also collects and reviews equality and diversity data about its workforce, and this information is included at the end of this update.

Goal 4 Inclusive leadership at all levels

The Trust took the view that the national Equalities competencies for managers are too large to include in every manager's job description within the Trust, however all managers are expected to undertake training in equality and diversity, which is built into the mandatory training requirements for staff, including all members of the trust board, which was successfully completed in 2013.

Objectives for 2014

The Trusts Equality Steering Group, supported by the Trust Board, agreed ten objectives to work towards during 2014, which build upon existing work, and address new areas of focus.

Better health outcomes

- 1 Delivery of CQUIN targets
- 2 FT Public Member Health & Wellbeing Event

Improved patient access and experience

- 3 On-going collection of patient feedback on protected characteristics
 - Review of information at Equality Steering Group
 - Agree actions as appropriate
 - Include outcomes in Quality Accounts
- 4 Survey FT Public members regarding service standards v protected characteristics

A representative and supported workforce

- 5 R&S Policy review
- 6 Dignity at Work Policy Review
- 7 Flexible Working Policies Review

Inclusive Leadership

- 8 Board Mandatory Training Compliance
- 9 Roll out Trust Values promotion of 'Respect' built into appraisal process
- 10 Roll out of Value Based Recruitment

At the end of 2013 however, a more simplified version of the NHS Equality Delivery System was published, so in addition to continuing with the objectives for the coming year, the steering group will review the new EDS ready for 2015.



Equality & Diversity Workforce Monitoring Information 2013

<u>Age</u>

	Staff							
	in							
	Post							
	31-							
Age	DEC-	%			Training	Appraisal		
Range	2013	Headcount	Starters	Leavers	Attendance	Completed	Discipline	Grievance
19 and								
below	10	0.8%	4	0	3	1	0	0
20 - 29								
Years	187	14.4%	34	30	96	112	4	0
30 - 39								
Years	278	21.4%	48	43	156	176	7	2
40 - 49								
Years	389	29.9%	30	29	227	265	3	0
50 - 59								
Years	342	26.3%	16	15	202	239	5	0
60 and								
above	96	7.4%	4	34	52	66	0	1
	1302		136	151	736	859	19	3

<u>Gender</u>

	Staff							
	in							
	Post							
	31-							
	DEC-	%			Training	Appraisal		
Gender	2013	Headcount	Starters	Leavers	Attendance	Completed	Discipline	Grievance
Female	1000	77%	86	106	608	717	11	3
Male	302	23%	50	45	128	142	8	0
	1302		136	151	736	859	19	3

Part time / full time

	Full Time	Part Time	Total
Female	431	569	1000
Male	262	40	302
	693	609	1302

<u>Ethnicity</u>

	Staff							
	in							
	Post							
	31-							
	DEC-	%			Training	Appraisal		
Ethnic Origin	2013	Headcount	Starters	Leavers	Attendance	Completed	Discipline	Grievance
Any Other Ethnic Group	7	0.5%	1	2	2	2	0	0
Asian or Asian British	25	1.9%	12	18	3	3	0	0
Black or Black British	8	0.6%	3	1	2	3	0	0
Chinese	1	0.1%	0	1	0	0	0	0
Mixed - Any mixed background	6	0.5%	0	2	1	0	0	0
Not Stated	112	8.6%	12	16	66	70	1	1
White - British	1036	79.6%	104	102	598	713	17	2
White - Other	107	8.2%	4	9	64	68	1	0
	1302		136	151	736	859	19	3

Recruitment Activity

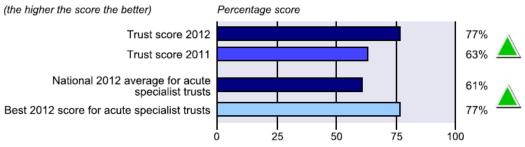
	Number of	Number of Applications			Gender
Recruitment Applications	Vacancies	Received	Male	Female	Undisclosed
Additional Clinical Services	36	1052	298	751	3
Additional Professional					
Scientific & Technical	3	21	7	14	0
Administrative & Clerical	69	1499	435	1062	2
Allied Health Professionals	33	347	124	223	0
Estates & Ancillary	15	317	153	162	2
Medical & Dental	19	282	250	32	0
Nursing & Midwifery					
Registered	49	564	50	514	0
	224	4082	1317	2758	7

Applications received by Ethnicity	WHITE - British	WHITE - OTHER	Asian or Asian British	Mixed - Any mixed background	Black or Black British	Chinese	Any other ethnic group	Undisclosed
Additional Clinical Services	850	36	88	15	38	4	14	7
Additional Professional Scientific & Technical	11	5	3	0	1	1	0	0
Administrative & Clerical	1201	33	158	19	63	2	9	14
Allied Health Professionals	187	47	84	3	16	1	8	1
Estates & Ancillary	269	15	19	2	10	0	1	1
Medical & Dental	9	83	117	9	24	1	30	9
Nursing & Midwifery Registered	477	25	29	5	6	4	16	2
	3004	244	498	53	158	13	78	34

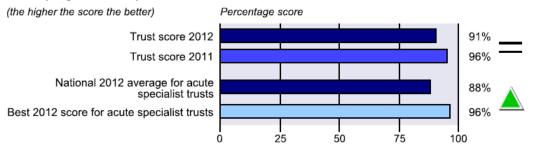
National Staff Survey Result 2012

ADDITIONAL THEME: Equality and diversity

KEY FINDING 26. Percentage of staff having equality and diversity training in last 12 months



KEY FINDING 27. Percentage of staff believing the trust provides equal opportunities for career progression or promotion



KEY FINDING 28. Percentage of staff experiencing discrimination at work in last 12 months

