

# Annual Equality Report 2017



# Executive Summary

At University Hospitals Birmingham, we are committed to valuing and celebrating diversity, to delivering equal opportunities for all staff and service users, and ensuring that everyone feels respected and valued as part of our team and community.

## Key Progress Over 2017

- Enhanced patient experience, including work to introduce Pets for Therapy, meeting patients cultural and religious needs, supporting Carers and patients with a disability or additional needs
- Increased support for our local community, including the community food and clothing bank, and widening participation through the Learning Hub
- Enhancing staff experience, through listening to the views of our BAME, LGBT and disabled staff alongside initiatives to improve staff health and wellbeing
- Successful Stonewall Workplace Equality Index Submission, resulting in a ranking increase of 100 places
- Enrolment to the Disability Confident Scheme and being awarded status of Disability Confident Committed

## Objectives for 2018

### **Staff:**

- Increase self reporting across all of the protected characteristics but in particular faith, sexuality and disability.
- To launch LGBT, BAME and Disability staff networks and merge these staff networks with those at Heart of England FT post merger
- Address any issues arising from the WDES
- Define common inclusion priorities across the newly formed trust
- Have representation at Birmingham Pride

### **Service Users:**

- Look to identify improved communication for deaf and hard of hearing service users
- Identify a changing places facility at UHB
- Develop further 'neutral places' for at risk groups
- Ensure training is rolled out to support recording of all protected characteristics on patient systems



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# 1. Introduction



The Equality Act 2010 which replaced the race, disability and gender equality duties introduced a public sector equality duty. This requires that public sector organisations must have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation
- Advance equality of opportunity between different groups
- Foster good relations between different groups

The Act details a range of 'protected characteristics' that need to be covered. These are:

Age, Disability, Gender, Gender Reassignment, Pregnancy and Maternity, Race, Religion or Belief, Sexual Orientation and Marital Status.

As an organisation we have to have due regard to our commitments, both as an employer and as a service provider.

The way that we assess for any areas of weakness and plan to change either our employment practices or the way that we deliver our services, is encapsulated in a national system used in the NHS known as the Equality Delivery System II (EDS).

# Equality Delivery System II



The EDS II has four strategic objectives:

1. Better health outcomes for all;
2. Improved patient access and experience;
3. Empowered, engaged and included staff;
4. Inclusive leadership at all levels.

The delivery of these objectives is supported by a set of measures that the organisation can use, along with its partners, to assess its performance and then set measurable actions to improve performance. The Trusts EDS objectives and report can be found at <http://www.uhb.nhs.uk/eds.htm>

Since 2015, the Trust started publishing indicators of workforce equality, as part of the Workforce Race Equality Standard (WRES). This has allowed us to assess whether there has been less favourable treatment of the BME workforce in respect of their treatment and experience within the NHS. The WRES has been used to assist our organisation in implementing the EDS. The Trusts WRES objectives and report can be found at <http://www.uhb.nhs.uk/eds.htm>

In addition, the Accessible Information Standard <https://www.england.nhs.uk/ourwork/accessibleinfo/> was launched nationally in June 2015, aiming to improve information for disabled people and any communication they might need. We are currently assessing with leads permanent solutions that will ensure that our patient's needs are recorded in perpetuity.

From 2018 the Trust will also report on the new Workforce Disability Equality Standard - <https://www.england.nhs.uk/2016/09/wdes/>

In the autumn of 2016 Heart of England NHS Foundation Trust and UHB commenced joint working across all of the areas contained in this report.

# 2. 2017 Update



# People with Special Needs



The trust has been asked by NHSI to participate as one of two NHS Trust leads (the other being Imperial) in the 'Changing our Lives; National Quality Checking Pilot', setting standards for the care of service users with learning disabilities. We were assessed and provided evidence in November 2017. We will continue to participate with the overall aim of producing an NHS best practice document for the treatment and care of service users with learning disabilities. UHB is recognised as being an exemplar site. The report is available here - <http://uhbhome/Downloads/pdf/LearningDisabilitiesChangingOurLives.pdf>

## **Summary of work carried out in 2017**

- Continued Learning Disabilities and Autism training for staff
- The Accessible Information Standard Information modules continue – Total: 392 staff have completed Module 1 (Information) and 374 staff have completed Module 2 (Towards Excellence)
- National Quality Checking pilot in ED which took place in November, report back was very positive, and looking now to carry out an always event plan i.e. do the right thing at the right time
- Produced 'Coming into Hospital' and 'Staying in Hospital' booklets for patients who are visiting the trust, either as an outpatient or inpatient. The booklets are available on the internet
- Some work undertaken with Assure Renal Dialysis Unit (easy read documentation)
- Starlight boxes now available in ED and with named nurse (activities box)
- Objects of reference boxes now available in ED and with the named nurse
- Patient reviews and support continues on the wards and in Outpatient areas

## **Plans for 2018**

- Plans for the 2nd part of the learning disabilities filming with Communicate 2 U
- For an audit of the Trust to be completed by Communicate 2 U, then to follow on with appropriate training
- Deaf/Blind information and Braille alphabets to be added to all communication boxes
- See Me Care Bundle for hearing and vision loss to be completed
- Work with Selly Oak Trust School and Communicate 2 U on apprentices and work placements
- ED to undertake some training at Wast Hills Hospital
- Easy read version of the friends and family surveys (Patient Experience)

# Support for Carers



The Carers Strategy Group has been meeting regularly to review support offered to carers and to ensure we are listening and responding to the views of carers about their experience.

A carer's survey was implemented and initial feedback has helped to inform the actions of the group. A 'partners in care' leaflet has been produced to raise awareness for carers about what they can expect from the trust. Guidelines relating to relatives staying overnight have been updated and new guest beds purchased meaning all wards have the number of beds they require for carers who need to stay overnight. A 'listening' event held recently engaged staff and staff with caring responsibilities, in talking about the things that matter for carers and any barriers experienced.

The Trust has received funding until March 2019 via the Better Care Fund for a Carers Coordinator to promote early identification, recognition, assessment, intervention and support for carers, as well as staff training and the provision of carer specific information.

The recently appointed Carers Co-ordinator will be focussing on the identification and support of carers as well responding to the training and support needs of staff. With an initial focus on the Heritage building, this role is pivotal in enhancing the resources, care and support we are able to offer carers. A key focus will be to equip staff with the knowledge and skills to understand their role in supporting cares as well as when to signpost them to other third sector providers.

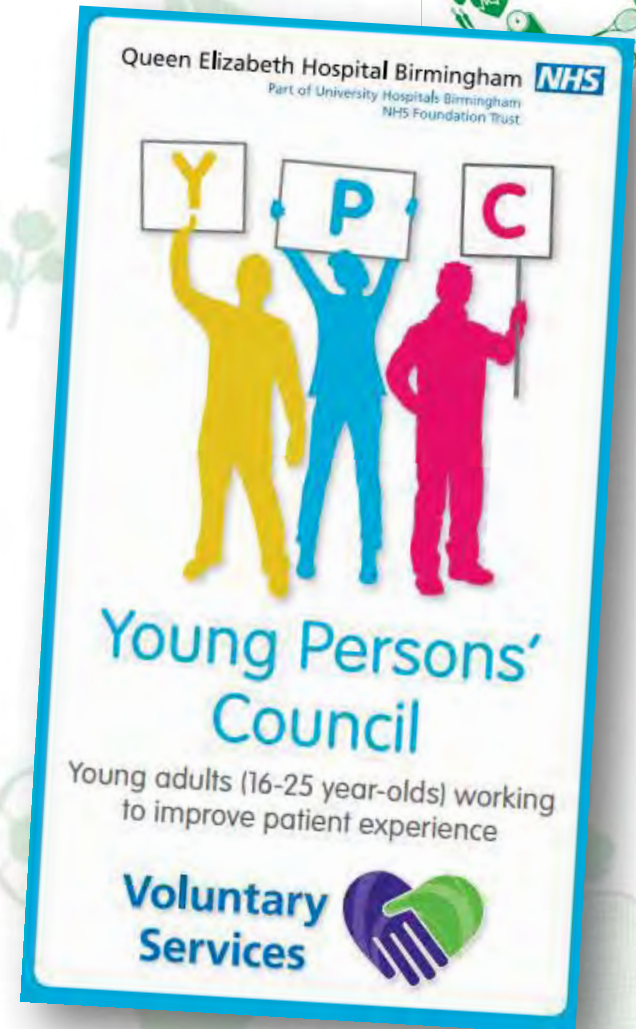


# Saturday Social

The Saturday Social programme started in November 2017 where trained Young Persons' Council members began to visit young people who are patients on Saturday mornings.

The aim of the programme is for council members to spend some time chatting with the patients and collect feedback.

We have also had some funding to enable us to leave patients with either a Costa or WHSmith voucher or a puzzle or colouring book.



# Pets in Hospital



The Trust has signed off procedural documents to set up a Pets in Hospital scheme that will be run by QEHB Charity. This scheme will allow wards to pre-book visits from a Pets in Hospital volunteer and their dog. We know that patients miss their own pets while they are in hospital and feedback from other trusts indicate how beneficial patients find such visits where they have established schemes.

In putting together the procedural document and risk assessment a task and finish group was established including representatives from QEHB Charity, Health and Safety, Infection Control, Critical Care, Renal, Estates and Facilities, Patient Experience, Inclusion, Communications, Young Patients, End of Life, Voluntary Services, Dignity/Older Persons and Practice Development, as well as a patient representative. Advice was also sought from chaplaincy colleagues to clarify whether there were any cultural issues that may need to be considered.

A pre-visit checklist will enable ward staff to identify any patients, or staff, with dog phobias, allergies etc. All visiting dogs will have undergone behavioural checks prior to be registered onto the scheme.

This initiative has now been approved and is in the 'planning for implementation' stage. With stringent safeguards and procedures in place, this will enable dogs to be brought to hospital under supervision to enhance the patient experience. The trust also has an inclusive assistance dog policy and a number of staff have assistance dogs at work on a daily basis.



# Interpreting and Translation Services

During the period 1 April - 31 December 2017, the Trust's requirement for interpreting support has been wide and varied. Support has been requested for 80 languages in total.

The Trust's Top 10 languages are illustrated in the table on the right and are reflective of the diverse nature of the patient population accessing healthcare via University Hospital Birmingham NHS Foundation Trust.

The activity connected with support for the hearing, sight and/or sensory impaired is worryingly low and is perhaps an indication that the Trust may need to do more to actively engage this community and to promote the availability of a comprehensive interpreting service via BILCS.

We are exploring App based signing for key departments and interventions with Signly. It is early days but we hope to be able to improve the services we provide to deaf service users.

LANGUAGE	Total Requests (Apr 17'-Dec 17')
URDU	2259
PUNJABI	1357
ARABIC	1207
POLISH	1068
BENGALI	951
BRITISH SIGN LANGUAGE (BSL)	901
ROMANIAN	895
FARSI (PERSIAN - IRANIAN)	461
SOMALI	383
CANTONESE	336



# Religious and Cultural Needs



We are very fortunate in the Trust to have a multi faith centre on site and to have a hospital chaplaincy team that caters for a wide range of religious groups, and also offers more generic spiritual support to our patients. Access to these services is available for all of our patients and their families and details of chaplaincy contacts can be seen here <https://www.uhb.nhs.uk/contact-chaplaincy.htm>



We published the Faith and Community Compendium in Spring 2016, which is a collection of information about faith and beliefs, communities, sexualities and gender identities that individuals may identify as.

The compendium is available to all staff on the staff intranet and is used to help UHB staff understand the needs of their patients and families to improve the healthcare that we provide. In addition, it will also be used to help staff understand their fellow colleagues' differences, in order to promote diversity and openness within the trust. <http://uhbhome/FaithAndCommunityCompendium/>



# Multi-faith Chaplaincy Team



Throughout the year the Chaplaincy team at UHB arranges a variety of cultural and faith celebrations that reflect something of the diversity amongst our patients and staff. In 2017 we marked the 200<sup>th</sup> anniversary of the birth of Bahá'u'lláh, Eid, Diwali, Bhandi Chhor, Guru Nanak Dev Ji's birthday, Paranirvana Day, Sangha Day, Chanukah, Christmas, Easter and more. These occasions are all expressions of the ways in which as a Chaplaincy team and as a wider trust, we seek to be welcoming of all, committed to growing in understanding and respect and to build healthier lives.



The Lord Mayor of Birmingham along with some of Birmingham's faith leaders come to a celebration of the unveiling of the Mihrab.



Rehanah Sadiq, one of our two Muslim Chaplains received a Best in Care Award for her work in developing a Mihrab in our Muslim Prayer Room.

# Multi-faith Chaplaincy Team



Throughout 2017 we have worked particularly hard to develop the following:

- Our Mindfulness project, delivered by two experienced Buddhist chaplaincy colleagues.  
*The Mindfulness project at UHB seeks to enhance the health and wellbeing of staff. The initiative to offer mindfulness to our staff has developed significantly with financial support from both Inclusion and Wellbeing and Division D QEHB Charities. It is offered as a tried and tested intervention in self-care and there is an ever-growing amount of empirical research that demonstrates its' effectiveness. Mindfulness has been shown to be an effective way to manage stress and anxiety, and also improve work experience and quality of work.*
- Ongoing development of teaching programme within the Trust offered by members of the Chaplaincy team in which we teach clinical teams equipping them to deliver patient-centred spiritual care in a variety of contexts and circumstances.
- Provision of supervision support for Palliative Care CNS staff by several of Chaplaincy team.
- Welcoming our first Humanist Honorary Chaplain and Baha'i Chaplaincy volunteers to the team to reflect an ever-greater diversity within the hospital community.
- Ongoing development of a Chaplaincy database that enables us to respond to patient's spiritual needs in a more timely manner. Several other local Trusts have made enquiries about purchasing this software.
- Continuing close working with Chaplaincy / Spiritual Care teams in other local Trusts and Hospices to deliver high quality training for new Chaplaincy volunteers.
- Development of a new mentoring programme and CPD training for both Chaplains and Chaplaincy Volunteers.
- Continuing development of the QEHB Food and Clothing Bank, providing patients with essentials at the point of discharge. This project is run in partnership with the Trussell Trust and the Sparkhill Foodbank.
- Funding secured for members of Chaplaincy team to receive clinical supervision.
- Development of new publicity material describing the work of Chaplaincy to patients and staff
- Secured funding from QEHB Charity for 2 colleagues to participate in Master's Degree programmes.
- Students and newly qualified Chaplains from other Trusts on placements with Chaplaincy team at UHB.
- Patient experience surveys & engagement with representatives from local faith / belief communities to ensure that UHB can support our many patients in the most culturally sensitive and informed way.
- Celebrations of the Black History Month

# Meeting the Needs of LGBT Staff and Patients



We have been working on a range of projects to improve the service we provide to patients and staff who identify as LGBT. This has included ensuring our policies are inclusive and fair, monitoring LGBT data and creating pathways for LGBT patient and staff voices to be listened to. We have again signed up to the Stonewall Diversity Champions programme (page 24).

2018 will see the launch of our Trust LGBT staff network, which will provide a social forum for LGBT staff to meet and a platform for staff to support and advise the Trust on policy and strategy.

In July 2018 we will be hosting the first national conference for South Asian LGBT group, “Finding a Voice”. Aimed at supporting LGBT people from the Sikh, Muslim and Hindu communities we recognise that cultural and religious pressures pose added problems for the physical, social and mental health of LGBT South Asians. As part of the trusts 3<sup>rd</sup> sector collaborative working programme we will support “Finding a Voice” in a neutral environment.

We will look to develop ‘neutral environments’ across all sites to assist groups where meeting has significant implications to their safety.

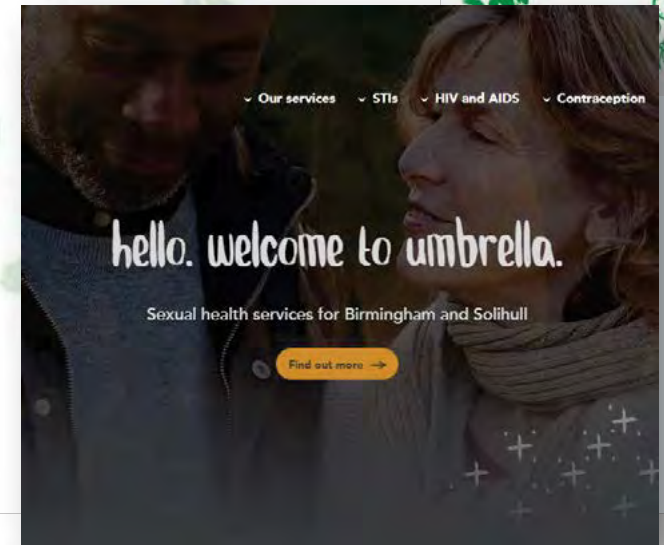


# Umbrella

In August 2015 UHB via Umbrella were commissioned to provide sexual health services across Birmingham and Solihull.

A full annual report can be found at [www.umbrellahealth.co.uk/files/downloads/annualreport1617.pdf](http://www.umbrellahealth.co.uk/files/downloads/annualreport1617.pdf)

The Umbrella service seeks to achieve greater access to sexual health services for all residents of Birmingham and Solihull through training, education, health promotion and partnership working, creating a service that is inclusive and accessible for all.





# Patient Experience Feedback- Hard to reach groups



Based on feedback from patients, carers and staff, the trust wide patient experience surveys have been reviewed and updated to ensure that questions asked are relevant and will be used to inform actions that drive improvements to patient experience.

Ensuring we listen to our most vulnerable patients is the driver for work ongoing around ensuring we have mechanisms in place to support patients with additional needs. Demographics collected on our patient experience surveys have recently been updated so we are able to identify groups that are not getting the opportunity to provide feedback.

We have recently introduced a large font version of the FFT survey and are finalising an easy read version previously trialled and updated based on patient feedback.



# The Queen Elizabeth Hospital Food and Clothing Bank Collaboration

As we have previously reported we are partnered with The Trussell Trust - <https://www.trusselltrust.org/>- and the hospital's Faith and Community Centre to collect food and clothing for the local community via The Sparkhill Foodbank - <https://sparkhill.foodbank.org.uk/>.

Both of these projects have been incredibly successful and we have been in discussion with The Trussell Trust to set up collection points with colleagues at Heart of England FT across their sites at Heartlands Hospital, Good Hope Hospital and Solihull Hospital. It is our intention that any donations from these three hospitals will support local food/clothing banks in the areas they serve, providing us with a network of supported services. As no local banks have the capacity all donations from the four main hospital sites will be collected by Narthex (Sparkhill) who will act as the lead.

What makes the scheme unique is that our staff can 'draw down' food vouchers or a food parcel and a complete change of clothing for patients that they assess as being in need. We have purchased four double wardrobes in which to store clothes which are kept stocked by Chaplaincy Volunteers. This enables us to have access around the clock should patients need assistance.

In the last year Sparkhill foodbank have issued 86 food parcels to clients via the Queen Elizabeth Hospital, feeding a total of 130 people. In total the food bank has received donations from the 'drop bins' at the Queen Elizabeth Hospital since January 2017, equivalent to providing 1,000 meals for local people. A grand total of 2,500 have been donated since the project started. Staff and Patients at the QE hospital have donated 1.9 tonnes of clothes over last 12 months. This equates to being able to provide roughly 500 emergency clothes parcels to patients in crisis.

In the last 6 months 263 people clothed via the Sparkhill Clothing bank; they have seen a 20% rise in the issuing of food parcels since January which they attribute to Universal Credit and estimate this may go as high as 60% by year end. They are seeing 400 people per week of which 43% are new referrals. Sparkhill are dealing with people carrying up to £500,000 of debt and some with up to 13 debtors.



# The Learning Hub



The Learning Hub is a purpose built training centre funded by University Hospitals Birmingham and the European Social Fund. It is based at the rear of the new Queen Elizabeth Hospital Birmingham on Metchley Lane. It's aim is to assist unemployed people within the local community back into work, by providing pre-employment training, advice and guidance. The Learning Hub delivers a range of training courses in-house, with a number of these having AQA accreditation.

Once registered with the Learning Hub, clients complete a 12 week programme of support which includes an initial 1 week employability programme followed by 4 weeks of "Pick and Mix" vocational based workshops, such as infection control, information governance, medical terminology, basic food hygiene and telephone techniques. Clients are then referred to the "Aftercare Team" for a further 6 weeks, which includes a 3 week work shadowing placement, attendance to workshops which support clients with the transition from unemployment to employment, and ongoing 1:1 mentoring support. We also work in partnership with the Prince's Trust in the delivery of a 5 week "Get into Hospitals Programme" which includes 2 weeks of classroom based training followed by a 3 week work-based placement.

Within the last financial year (Mar 17 – Feb 18), the Learning Hub has supported 140 people into work. Combined outputs to date demonstrate that the Learning Hub has supported 2,487 clients into employment from when the Trust began offering its employability programme.

At the end of Q3 for the YPP initiative we have supported 639 young people onto our programmes. We have 153 evidenced job/ apprenticeship and training outcomes with a further 36 awaiting start dates or evidence of their starts.

In October 2017 a meeting with Remploy was convened to discuss how we could work together on future contracts. Remploy have recently been successful in obtaining a contract for a new project called "Thrive" and once more information is available we have agreed to meet again. In August 2017 an outline bid was submitted by Birmingham City Council (BCC) to Department for Work and Pensions (DWP) which included a continuation of UHB delivery. In December we were informed that there was a possibility of an extension to the current ESF contract due to a national underspend of YEI funding however the initial outline for ESF 1.2 programme had already been approved by DWP and the full outline deadline for submission was 16<sup>th</sup> March. A decision has therefore been taken to submit the full outline for ESF 1.2 and in the event that the extension is approved this bid will be removed. UHB are a named delivery partner for both of these options.

In October 2017 DWP awarded the Hub a contract to deliver a customised programme to 6 Syrian Refugees. All referrals were via Job Centre Plus as agreed in the contract, however from 7 referrals we were only able to recruit 2 suitable clients. The reasons why the other 5 weren't suitable was due to very low level of spoken and written English and their availability to attend the programme due to caring responsibilities. We have continued to work with the 2 clients; they have now completed their employability training and start their Finance work placements in January 2018.



# Disability Confident Scheme



The Disability Confident Scheme is designed to help employers recruit and retain disabled people and people with health conditions. Employers are required to agree to the Disability Confident commitments and identify at least one action that they will carry out to make a difference for disabled people.

The commitments are as follows:

- ensure our recruitment process is inclusive and accessible
- communicating and promoting vacancies
- offering an interview to disabled people
- anticipating and providing reasonable adjustments as required
- supporting any existing employee who acquires a disability or long term health condition, enabling them to stay in work
- at least one activity that will make a difference for disabled people

We have registered with the scheme, and have been awarded the status of Disability Confident Committed. We endeavour to progress further than the current level 1; our initial assessment of level 2 has identified restrictions in the recruitment process via NHS Jobs. We are in discussions with NHS Jobs as this will clearly not only affect UHB.



# BAME, LGBT and Disability Staff Focus Groups



In October, the Inclusion Team held six focus groups for BAME staff, LGBT+ staff and staff with a disability or long term condition.

The aim of these focus groups was to listen to staff's views on whether the organisation meets the needs of its staff and patients and to gather ideas for what the Trust needs to do to improve the care of disabled, BAME and LGBT+ patients, and to improve the experience for our disabled, BAME, and LGBT+ staff.

Staff views were also sought on the Trust setting up staff networks for BAME, LGBT+ and staff with a disability or long term condition. These new staff networks will be launched in January 2018 to support the Trust, advising on policy and procedures for staff and patients and ensuring access and fair treatment for all. Information about the networks can be found here - <http://uhbhome/staff-networks.htm>

Staff Focus Groups - October 2017

Would you recommend UHB as a place to be treated?	
Yes:	No:
Would you recommend UHB as a place to be treated for disabled/BME/LGBT people?	
Yes:	No:
Whats good and what's not so good?	
What can we do to improve the care of disabled/BAME/LGBT people?	
Would you recommend UHB as a place to work?	
Yes:	No:
Would you recommend UHB as a place to work for disabled/BME/LGBT people?	
Yes:	No:
Whats good and what's not so good?	
What can we do to improve the working environment for disabled/BAME/LGBT people?	

# Staff Health and Wellbeing



We recognise that staff wellbeing is inextricably linked to the quality of care delivered to our patients, and that current workplace pressures can have an adverse impact on staff wellbeing. We therefore offer a number of initiatives to staff to support the health and wellbeing of all staff at UHB.

Over the past twelve months we have enhanced the health and wellbeing offer available, and focused on a marketing campaign to raise awareness of the initiatives on offer.

These initiatives include:

- **Staff Support** – our onsite, free counselling service for staff
- **Staff Well Clinic** – free and confidential full health checks
- **Staff Physiotherapy** – fast access physiotherapy onsite
- **Occupational Health** – workplace assessments and advice
- **Morris Centre Club** – onsite leisure centre offering a fitness suite, swimming pool, beauty salon and variety of fitness classes
- **Mindfulness** – free weekly meditation sessions
- **Chaplaincy Support** – spiritual, religious and pastoral care
- **Stress Management Training**
- **Healthy Eating** – ‘Dave’s Fruit and Veg Stall’ is situated outside the main atrium Mon-Fri every week
- **QEHB Farmer’s Market** – twice monthly Farmer’s Market outside the main atrium
- **Community Orchards and Gardens** – wildlife, conservation and food growing areas
- **Online Staff Health and Wellbeing Service** – online advice and guidance

**Caring for staff @QEHB**

NHS University Hospitals Birmingham NHS Foundation Trust

For all of us at UHB to deliver the best in care, we need to care for ourselves and each other. See how the Trust can support your health and wellbeing.

- Staff Health**
  - ✓ Health checks at the Staff Well clinic
  - ✓ Staff physiotherapy
  - ✓ Healthy lifestyle support and leisure facilities
- Mental Health Support**
  - ✓ Counselling from Staff Support
  - ✓ Mindfulness
  - ✓ Stress management training
  - ✓ Chaplaincy
- Staff Networks**
  - ✓ BAME Staff Network
  - ✓ LGBT+ Staff Network
  - ✓ Staff with a disability or long term condition
- Community Wellbeing**
  - ✓ Food and Clothing Bank
  - ✓ Community Orchards and Gardens
  - ✓ Dave's Fruit and Veg
  - ✓ Farmer's Market

For further information please contact [wellbeing@uhb.nhs.uk](mailto:wellbeing@uhb.nhs.uk)  
Enquiries will always be treated in confidence.

# Conservation, Green Spaces and Community Orchard and Gardens



University Hospitals Birmingham has identified in excess of 16,000m<sup>2</sup> of land that will either be re-designated for food production or habitat enhancement. From wildflowers to growing fruit and bee keeping to woodland walks, the Community Orchard and Gardens project covers a huge variety of areas on the hospital campus that will have a variety of aims but the main focus is on improving the areas for use by the local community, hospital patients, visitors and staff.

Activities across the project will reach each corner of the hospital site and in total will include improvement and activity on almost four acres of land.

Some key highlights this year have been:

- Bat walk led by BrumBats across the QE green spaces at dusk – 20 people attended
- 21 members of the bird walk group – walks are last Sunday of every month
- 25 food growing sessions since January 2018
- Big Garden Birdwatch event Jan 2018
- A total of 195 volunteers with 84 currently active
- A total of 161 volunteer sessions
- We are currently working with groups such as Headway and Deafplus by providing Green Gym sessions at the food growing space.
- Created 14 wildflower 'hot spots' on high profile areas around the hospital with Buglife
- Numerous nest boxes put up in the woodland walk (all but one was occupied last year)
- Surplus produce from the growing space was taken to Fairshare and St Basils in Birmingham City Centre
- Undertaken various Citizen Science surveys such as tree health with local volunteers across the green spaces
- Large number of corporate activity days, including RBS, PWC & Jaguar Landrover







# Stonewall Workplace Equality Index



This year, we have submitted our second Workplace Equality Index Submission, which covers all aspects of employee life, and were awarded the status 'Stonewall Diversity Champion'.

The key areas we were assessed on were:

- **Policies and Benefits**
- **The Employee Lifecycle, including recruitment, training and leavers**
- **LGBT Networks, Allies and Role Modelling**
- **Senior Leadership**
- **Monitoring**
- **Procurement**
- **Community Engagement**
- **Service User Experience**

We also conducted an employee feedback survey, focusing specifically on LGBT issues in the workplace.

We were awarded a score of 62 out of 200. We ranked 239<sup>th</sup> out of 434 organisations taking part in the 2018 Index, and 24<sup>th</sup> out of the 60 Health and Social Care organisations that took part.

This is a rise of 100 places on our ranking of 339<sup>th</sup> out of 439 in the 2017 Index.



# Workforce Race Equality Standard (WRES)

Implementing the Workforce Race Equality Standard (WRES) is a requirement for NHS commissioners and NHS healthcare providers, through the NHS standard contract. The NHS Equality and Diversity Council announced on 31 July 2014 that it had agreed action to ensure employees from black and minority ethnic (BME) backgrounds have equal access to career opportunities and receive fair treatment in the workplace. NHS providers are expected to show progress against a number of indicators of workforce equality, including a specific indicator to address the low numbers of BME board members across the organisation.

This year we have again submitted our WRES data alongside analysis, and created an action plan for the coming year.

Our key actions arising are as follows:

- **Extension of middle management leadership programme to bands 6 and 7**
- **Continue to address unconscious bias, making unconscious bias training mandatory for all recruiting managers**
- **Address bullying and harassment within the Trust**
- **Establish a BAME Staff Network**

Our report is accessible here -

<https://www.uhb.nhs.uk/reports/wres-report-2017>



# The Accessible Information Standard



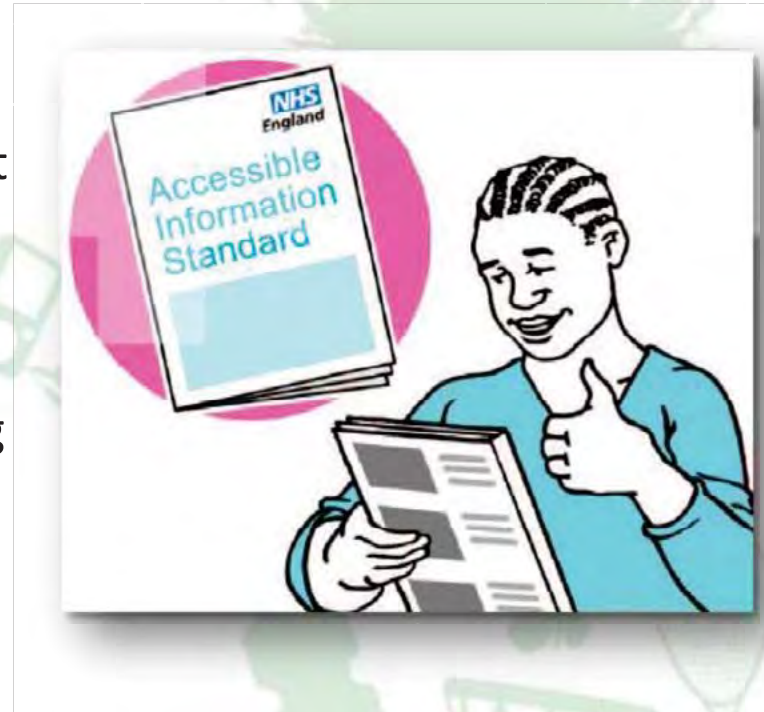
The Accessible Information Standard, formally known as DCB1605 Accessible Information, is made up of a Specification and Implementation Guidance.

From 1st August 2016 onwards, all organisations that provide NHS care and/or publicly-funded adult social care are legally required to follow the Accessible Information Standard.

The Standard sets out a specific, consistent approach to identifying, recording, flagging, sharing and meeting the information and communication support needs of patients, service users, carers and parents with a disability, impairment or sensory loss.

In August 2017, revised versions of the Specification and Implementation Guidance were issued, following a post-implementation review of the Standard.

The Trust are complying with the standard and are issuing training to support staff.



# 4. Data Report and Analysis





# Workforce Data as of 31<sup>st</sup> December 2017



# Our responsibilities as an employer

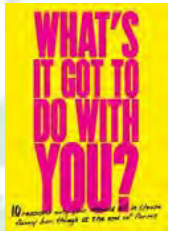


Four times a year we publish a breakdown of the workforce which details demographic and other data against the protected characteristics. This is available on our website. <http://www.uhb.nhs.uk/eds.htm>

The collection of data for new starters has improved over time, and we now have an electronic staff record for existing staff to update their details. We have been actively encouraging staff, via various communication routes, to update their own records to include more data.

One weakness which has been identified is the lack of data from staff relating to some of the protected characteristics which makes it more difficult to target where there may be areas of weakness. On average 30-38% of the workforce prefers not to answer questions about their sexuality, disability or faith. However we have ensured that all information can be self-recorded.

One of our key objectives for 2018 will be to raise awareness amongst our staff of the importance of collecting data as an employer and to reduce the number of staff who prefer not to answer. We will be using the principles as laid out in the Stonewall publication 'What's it got to do with you?'



We envisage that data collection will feature as an objective for the next 5 years as evidence from the Metropolitan Police suggests that it takes a sustained programme to engender trust and see results.

We use these workforce returns and the results of our annual staff survey to determine areas where we need to improve aspects of employment for our staff.

You can see our National Staff Survey results here - <http://www.uhb.nhs.uk/national-nhs-staff-survey.htm>

# Workforce Profile - Ethnicity



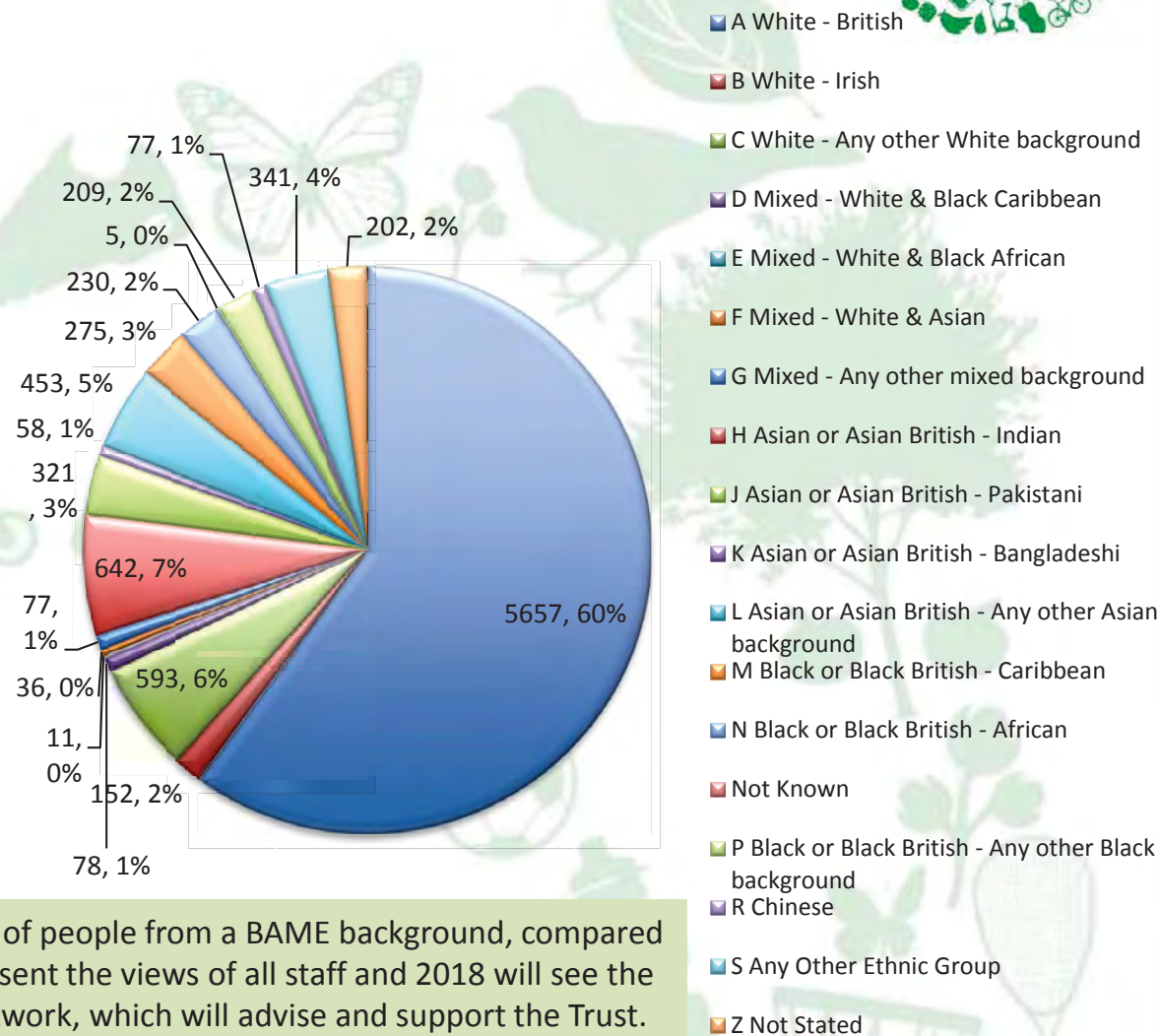
62% of the Trust's workforce are of a White British or Irish ethnic origin with 36% from a Black, Asian or Minority ethnic origin (BAME) and 2% of the workforce as not stated or undefined. The 2011 Census indicated 53% of the Birmingham population is from a White British ethnic origin and 47% from BME. This suggests we are under representative of the local population.

## 2017 Workforce Profile - Ethnicity

Comparison with data from 2016:

Ethnicity	2017		2016	
	Head Count	%	Head Count	%
White British and Irish	5809	62%	5733	63%
BAME	3401	36%	3167	35%
Not Stated or Not Known	207	2%	174	2%
<b>Grand Total</b>	<b>9417</b>	<b>100%</b>	<b>9074</b>	<b>100%</b>

We are aware that our workforce is under representative of people from a BAME background, compared to our local population. We want to ensure that we represent the views of all staff and 2018 will see the launch of new Staff Networks, including a BAME Staff Network, which will advise and support the Trust.



# Workforce Profile - Gender



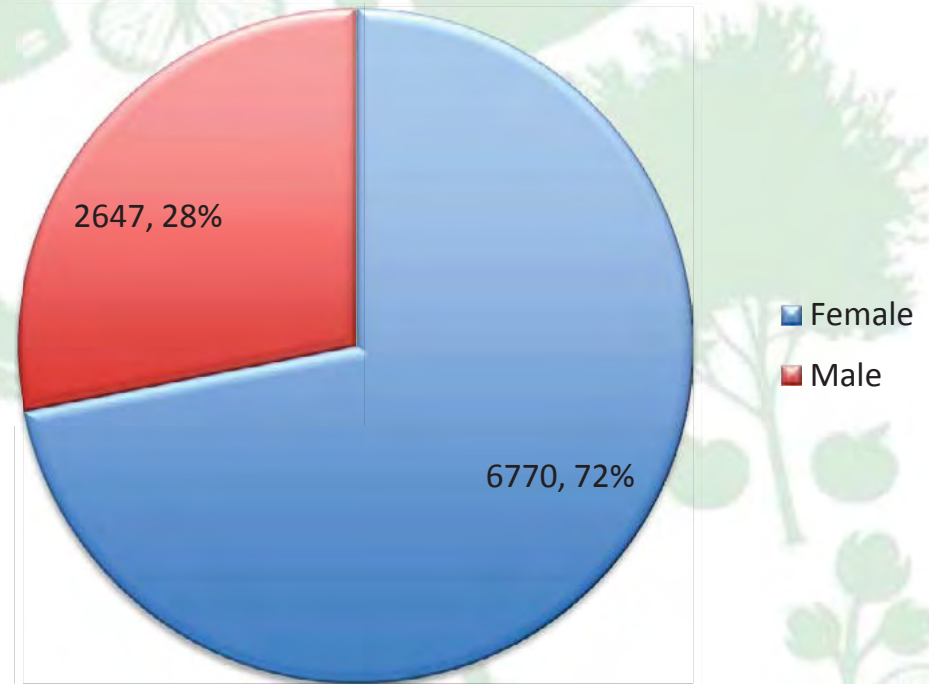
72% of the Trusts workforce is female and 28% are male.  
This is the same as our workforce profile for 2016.

According to NHS Employer's estimates (2016) the NHS workforce is 77% female and 23% male. Therefore our workforce gender percentage is similar compared to the overall NHS gender percentage in England.

Comparison with data from 2016:

Gender	2017		2016	
	Head Count	%	Head Count	%
Female	6770	72%	6503	72%
Male	2647	28%	2571	28%
<b>Grand Total</b>	<b>9417</b>	<b>100%</b>	<b>9074</b>	<b>100%</b>

## 2017 Workforce Profile - Gender



We are aware that our workforce is over representative of women, although this is in line with the national NHS workforce statistics. We want to ensure that all staff are treated fairly and following the new law under the Equality Act 2010 (Gender Pay Gap Information) Regulations in April 2017, we will investigate and report on the gender of our workforce at each pay band.



# Workforce Profile - Age

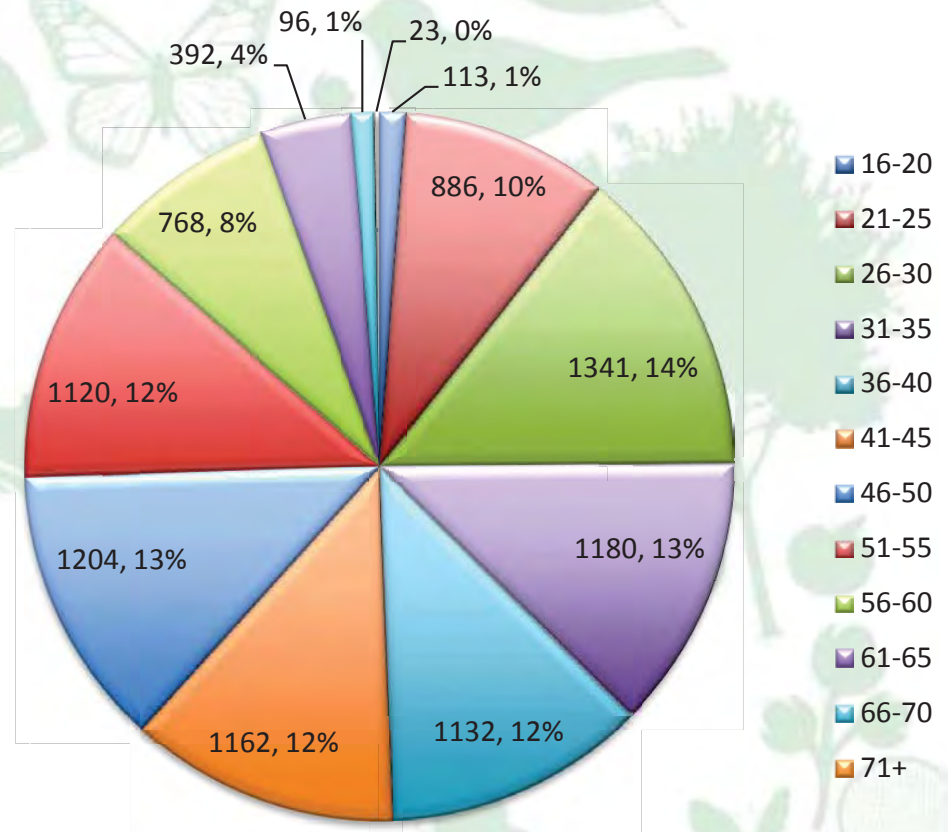


The largest age group within the workforce is those aged 26-30. The second two largest groups are those aged 31-35 and 46-50. The age composition of our workforce has stayed static over the last year.

Comparison with data from 2016:

Age	2017		2016	
	Head Count	%	Head Count	%
16-20	113	1.20%	94	1.04%
21-25	886	9.41%	839	9.25%
26-30	1341	14.24%	1233	13.59%
31-35	1180	12.53%	1151	12.68%
36-40	1132	12.02%	1134	12.50%
41-45	1162	12.34%	1129	12.44%
46-50	1204	12.79%	1156	12.74%
51-55	1120	11.89%	1097	12.09%
56-60	768	8.16%	756	8.33%
61-65	392	4.16%	373	4.11%
66-70	96	1.02%	95	1.05%
71+	23	0.24%	17	0.19%
<b>Grand Total</b>	<b>9417</b>	<b>100.00%</b>	<b>9074</b>	<b>100.00%</b>

## 2017 Workforce Profile - Age



We are aware that we have a large proportion of female staff who may be affected by the menopause, and at present, we do little to support them. 2018 will see the launch of our Menopause Policy, and greater stratified Health and Wellbeing Support available for staff.

# Workforce Profile - Disability

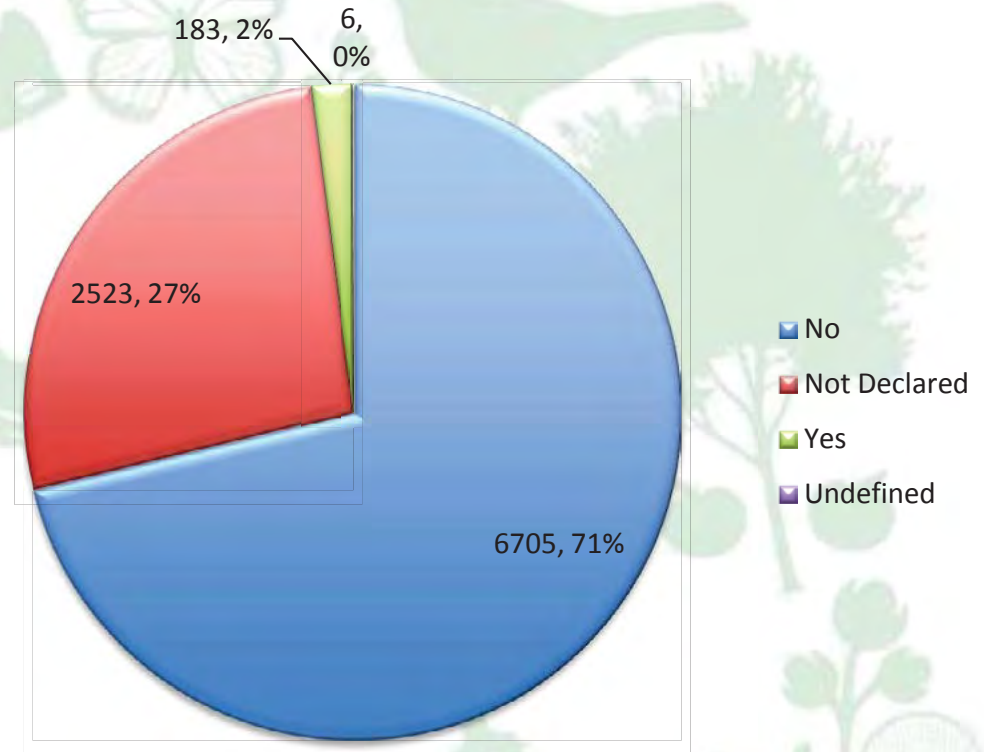


2% of staff have declared they are disabled.  
71% of staff are not disabled. 27% of staff are  
have not declared or undefined.

Comparison with data from 2016:

Disability	2017		2016	
	Head Count	%	Head Count	%
No	6705	71.20%	6343	69.90%
Not Declared	2523	26.79%	2540	27.99%
Yes	183	1.94%	186	2.05%
Undefined	6	0.06%	5	0.06%
<b>Grand Total</b>	<b>9417</b>	<b>100.00%</b>	<b>9074</b>	<b>100.00%</b>

## 2017 Workforce Profile - Disability



2% of our staff have declared themselves to have a disability, and this has stayed static over time, despite our previous involvement in the Two Ticks disability scheme, and our recent enrolment in the Disability Confident Scheme. We are aware that a high proportion of our staff have not disclosed whether or not they have a disability. This will be addressed in a data cleanse project throughout 2018, where we will encourage staff to update their personal details.

# Workforce Profile – Sexual Orientation

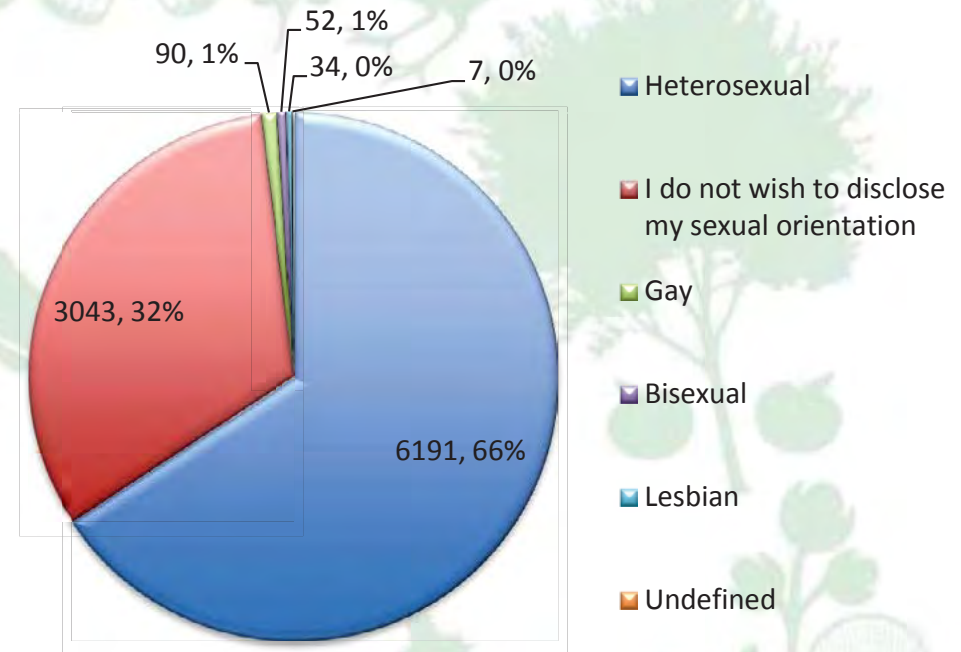
66% of employees have declared themselves as heterosexual with 32% having an undeclared or undefined sexual orientation. 2% have declared themselves to be LGBT.



## 2017 Workforce Profile – Sexual Orientation

Comparison with data from 2016:

Sexual Orientation	2017		2016	
	Head Count	%	Head Count	%
Heterosexual	6191	65.74%	5925	65.30%
Do not wish to disclose	3043	32.31%	2988	32.93%
Gay	90	0.96%	80	0.88%
Bisexual	52	0.55%	45	0.50%
Lesbian	34	0.36%	32	0.35%
Undefined	7	0.07%	4	0.04%
<b>Grand Total</b>	<b>9417</b>	<b>100.00%</b>	<b>9074</b>	<b>100.00%</b>



2% of our staff have declared themselves to be LGBT but we have seen a slight increase on last year's data.

We are aware that a 32% of our staff have chosen not to disclose their sexuality. This will be addressed in a data cleanse project throughout 2018, where we will encourage staff to update their personal details.

We want to ensure that we represent the views of all staff and 2018 will see the launch of Staff Networks, including an LGBT Staff Network, which will advise and support the Trust.

# Workforce Profile – Religion/Belief

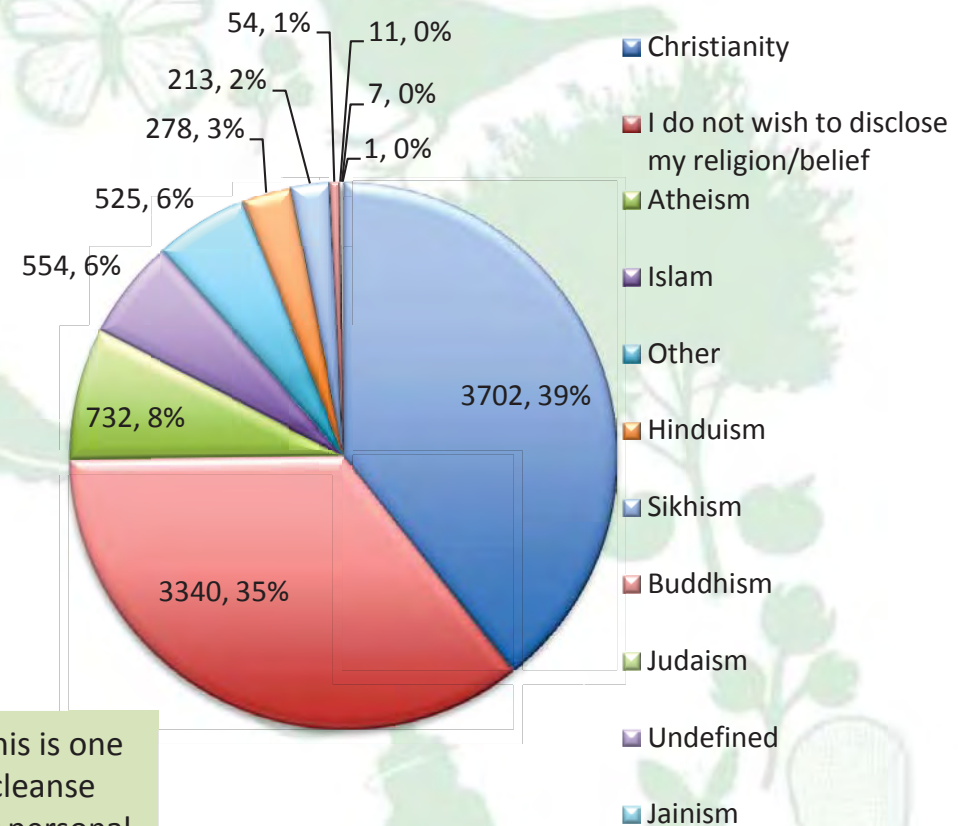
39% of our workforce are Christian, whilst 25% follow a different religion or belief. 35% of our workforce do not wish to disclose their religion or belief.

Comparison with data from 2016:

Religion/ Belief	2017		2016	
	Head Count	%	Head Count	%
Christianity	3702	39.31%	3629	39.99%
Do not wish to disclose	3340	35.47%	3281	36.16%
Atheism	732	7.77%	681	7.50%
Islam	554	5.88%	503	5.54%
Other	525	5.58%	453	4.99%
Hinduism	278	2.95%	276	3.04%
Sikhism	213	2.26%	193	2.13%
Buddhism	54	0.57%	40	0.44%
Judaism	11	0.12%	12	0.13%
Undefined	7	0.07%	5	0.06%
Jainism	1	0.01%	1	0.01%
<b>Grand Total</b>	<b>9417</b>	<b>100.00%</b>	<b>9074</b>	<b>100.00%</b>

35% of our workforce do not wish to disclose their religion or belief – this is one of the highest areas of non-disclosure. This will be addressed in a data cleanse project throughout 2018, where we will encourage staff to update their personal details. We are also aware we need to do more to ensure our staff feel safe to disclose their religion, and will be working with our Faith team to address this.

## 2017 Workforce Profile – Religion/Belief



# Workforce Profile – Maternity/ Adoption

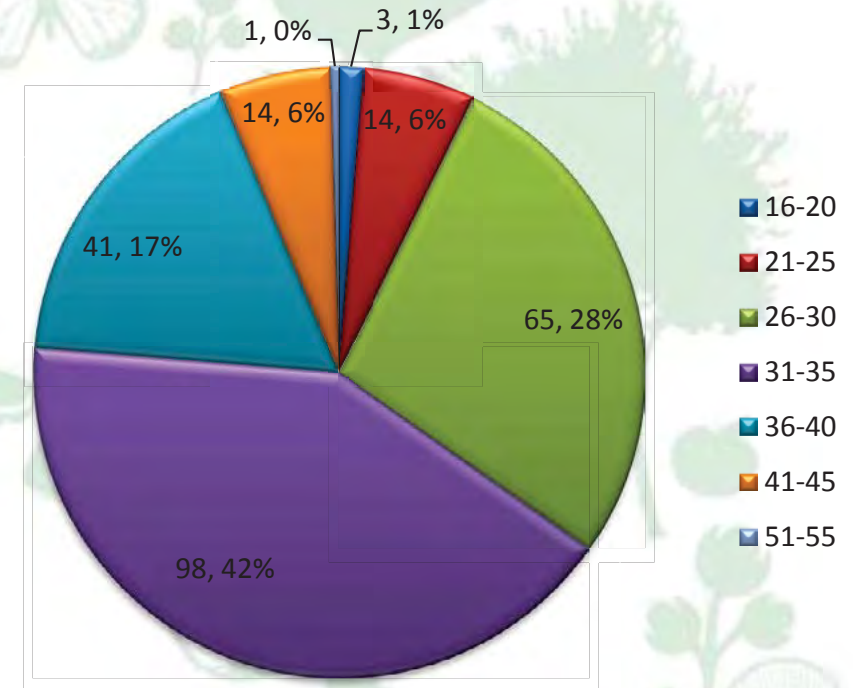


2.5% of staff are on maternity/adoption leave, which is similar to last years data. The largest percentage of staff on maternity/ adoption leave were within the age band 31-35.

Comparison with data from 2016:

Maternity/ Adoption	2017		2016	
	Head Count	%	Head Count	%
Total Maternity & Adoption	236	2.51%	247	2.72%
<b>Maternity/ Adoption by Age</b>				
16-20	3	1.27%		
21-25	14	5.93%	14	5.67%
26-30	65	27.54%	75	30.36%
31-35	98	41.53%	94	38.06%
36-40	41	17.37%	54	21.86%
41-45	14	5.93%	10	4.05%
51-55	1	0.42%		
<b>Grand Total</b>	<b>236</b>	<b>100.00%</b>	<b>247</b>	<b>100.00%</b>

## 2017 Workforce Profile – Maternity/ Adoption by Age



# Workforce Profile – Marital Status



31% of employees are married, 19% single, 2% divorced, and 0.5% in civil partnerships.

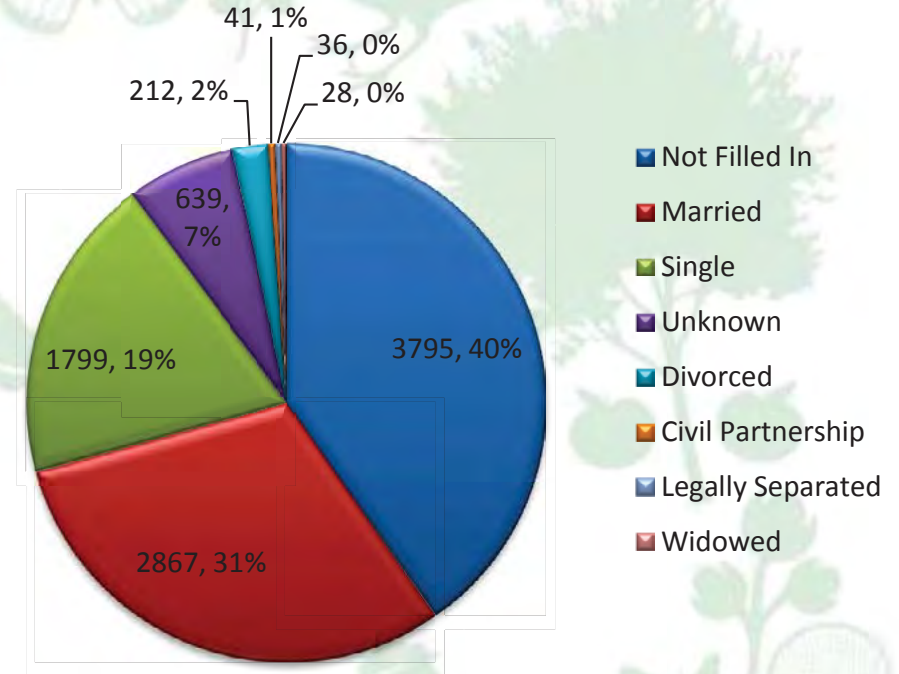
47% of employees are unknown or undisclosed.

Comparison with data from 2016:

Marital Status	2017		2016	
	Head Count	%	Head Count	%
Not Filled In	3795	40.30%	3592	39.59%
Married	2867	30.44%	2877	31.71%
Single	1799	19.10%	1675	18.46%
Unknown	639	6.79%	599	6.60%
Divorced	212	2.25%	222	2.45%
Civil Partnership	41	0.44%	41	0.45%
Legally Separated	36	0.38%	36	0.40%
Widowed	28	0.30%	32	0.35%
<b>Grand Total</b>	<b>9417</b>	<b>100.00%</b>	<b>9074</b>	<b>100.00%</b>

47% of our workforce have not disclosed their marital status – this is the highest area of non-disclosure. This will be addressed in a data cleanse project throughout 2018, where we will encourage staff to update their personal details.

## 2017 - Workforce Profile – Marital Status



# New Starters Data

In 2017 we had 1487 new starters, an increase compared to 1338 new starters in 2016.

- 48% of our new starters were White British or Irish; 48% were Black, Asian or Minority Ethnic (BAME). 4% were unknown or not stated. This indicates a positive shift towards a more diverse workforce.
- 68% of our new starters were female, compared to 32% male; this is a positive shift towards a more equal workforce.
- The highest percentage of new starters were within the age band 26-30 at 24%, followed by 21-25 at 23%, equating for nearly half of our new starters falling within the age range 21-30. Only 10% of new starters were aged over 50.
- 2% of our starters declared that they had a disability, whilst 89% declared they did not, and 9% were undefined or not declared.
- 3% of starters declared that their sexual orientation was either lesbian, gay or bisexual; this is slightly higher than our existing workforce composition. 19% were undisclosed or undefined.
- 35% of our new starters were Christian and 12% were Muslim. 25% chose not to disclose their religion or belief.

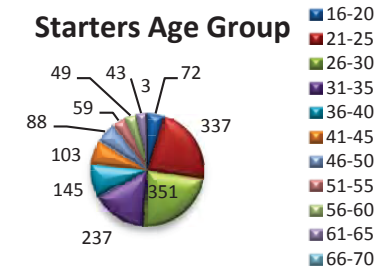
**Starters Ethnicity**



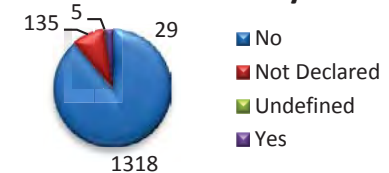
**Starters Gender**



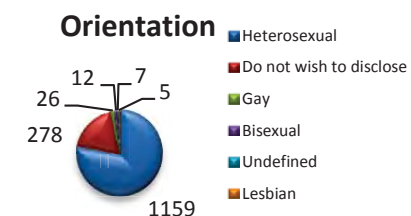
**Starters Age Group**



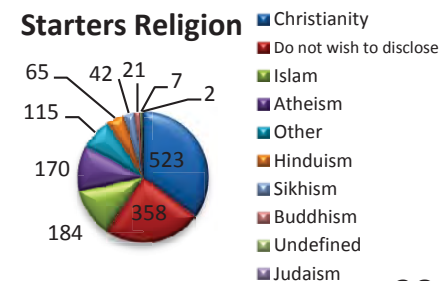
**Starters Disability**



**Starters Sexual Orientation**



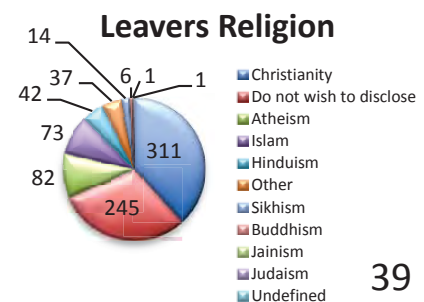
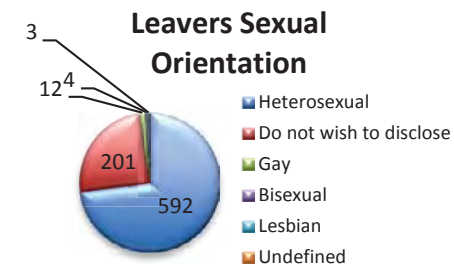
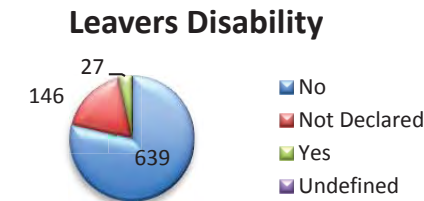
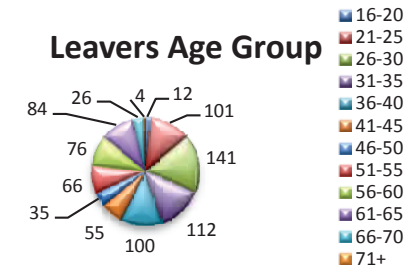
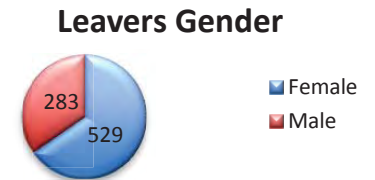
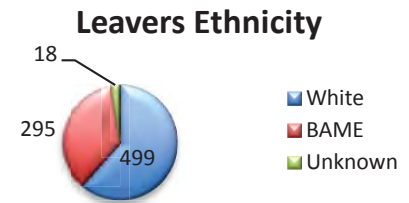
**Starters Religion**



# Leavers Data

In 2017 we had 812 leavers, a decrease compared to 858 leavers in 2016. This lower than our new starters data, indicating our workforce is significantly increasing each year.

- 61% of our leavers were White British or Irish; 36% were Black, Asian or Minority Ethnic (BAME). 2% were unknown or not stated. This is representative of our workforce composition.
- 65% of our leavers were female, compared to 35% male; this is a higher proportion of males compared to our overall workforce.
- The highest percentage of leavers were within the age band 26-30 at 17%, followed by 31-35 at 14%, equating for almost a third of our leavers falling within the age range 26-35.
- 3% of leavers declared that they had a disability, whilst 79% declared they did not, and 18% were undefined or not declared.
- 2% of leavers declared that their sexual orientation was either lesbian, gay or bisexual; this is representative of our existing workforce composition. 25% were undisclosed or undefined.
- 38% of our leavers were Christian, 10% Atheist and 9% were Muslim. 30% chose not to disclose their religion or belief.

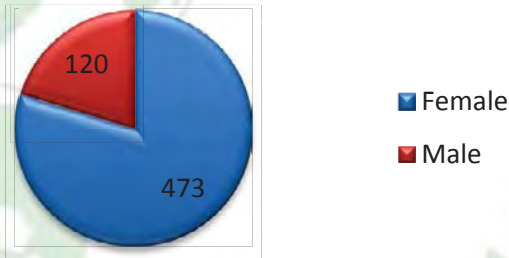




# Promotions Data

Promotions data has been obtained by using the data of staff who have moved up a pay band in the year 2017. We acknowledge this data does not include those that have had promotions/ changes in job role that did not have a change in pay band.

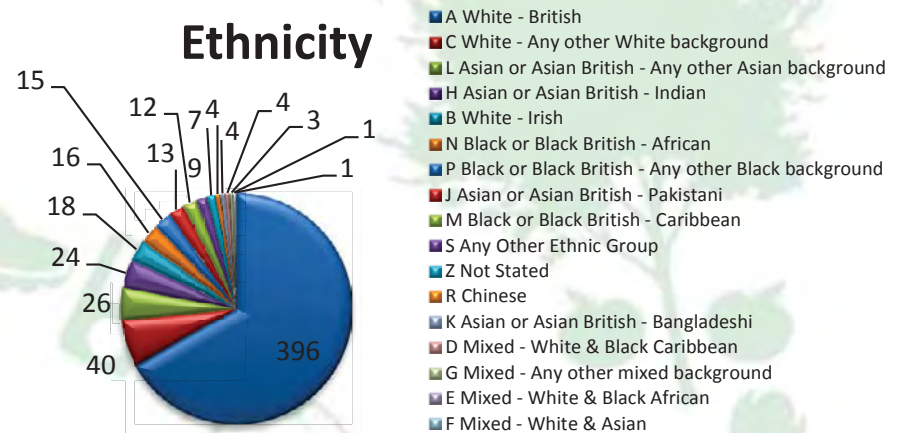
## Gender



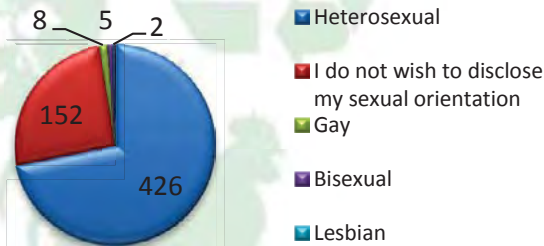
80% of staff who were promoted in the last year were female. This is slightly over-representative of our workforce, and an increase on 74% last year.

67% of staff who were promoted in the last year were White British. This is slightly over-representative of our workforce. 22% of staff who were promoted in the last year were BAME, which is again under representative of our BAME workforce (36%). This data is concerning, and we will investigate this with our BAME network which will be launched in 2018.

## Ethnicity



## Sexual Orientation



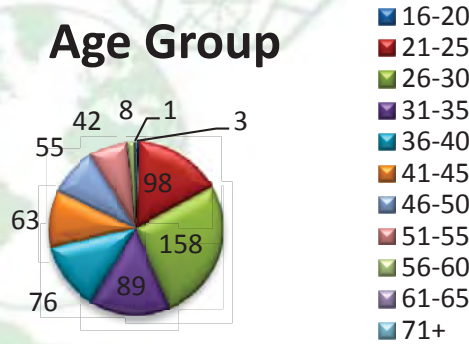
72% of staff who were promoted in the last year were heterosexual. 2.5% were LGBT. This is broadly representative of our workforce composition.



# Promotions Data



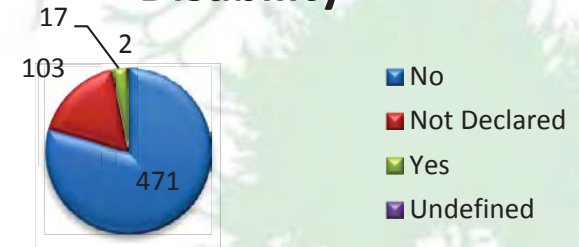
## Age Group



23% of staff who were promoted in the last year were aged 26-30, followed by 22% aged 21-25. The breakdown is broadly representative of our workforce, but over representative of staff aged 21-25.

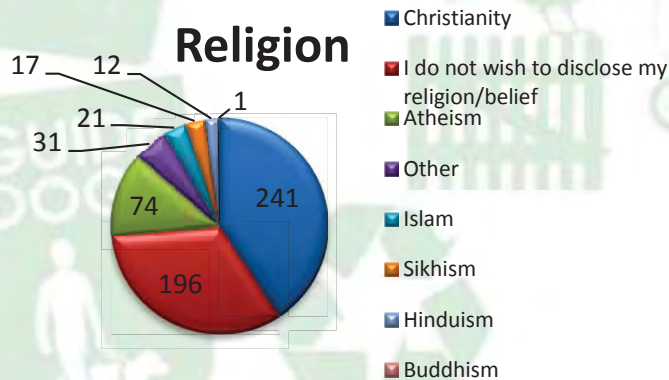
80% of staff who were promoted in the last year were not disabled; 3% declared a disability. This is representative of our workforce.

## Disability



41% of staff who were promoted in the last year were Christian, followed by 33% who did not wish to disclose. This is broadly representative of our workforce composition.

## Religion



Overall our promotions data is broadly representative of our workforce composition, and is not a cause for concern. However, we continually see in our staff survey results that some staff feel our organisation does not act fairly with regard to career progression/ promotion, regardless of ethnic background, gender, religion, sexual orientation, disability or age. We will investigate these perceptions through our Staff Networks, which will be launched in 2018.

# Training Data



In 2017, a total of 69617 training courses were undertaken by staff at UHB. Of these courses, the diversity data of delegates is as follows:

- Gender – 77% of staff undertaking training were female and 23% were male. These values are very similar to last years data, and are representative of our workforce.
- Disability - 72% declared they did not have a disability, 2% had declared a disability and 26% had either not stated or not declared. Again these values are in line with last years data and our overall staff profile.
- Age – The largest age group was 26-30, followed by 21-25. According to our overall staff profile, the largest age group is 26-30, so this is also in line with our staff profile. The high numbers of staff undertaking training in the 21-25 band is likely related to the number of new starters in that age range.
- Religion – 41% of staff undertaking training were Christian, followed by 34% who did not disclose their religion.
- Sexual Orientation – 2% of staff undertaking training identified as LGBT, with 67% identifying as heterosexual. The profiles for religion and sexual orientation are very similar to last years data, and the overall staff profile.
- Ethnicity – 59% of staff undertaking training were White British and 31% were BAME.

The diversity breakdown for staff that have undertaken training in 2017 is representative of the composition of our workforce. This suggests that opportunities for training are equal across the trust as a whole.



# Patient Data as of 1<sup>st</sup> January 2018



# Service provision



There is a requirement for the trust to publish the protected characteristics data pertinent to our patients/service users on our website <http://www.uhb.nhs.uk/equality-and-diversity.htm> annually, as well as the analysis provided in this report.

We have chosen to publish this data, and that for our workforce, every quarter to better provide up to date information where we can.

We will be able to record all protected characteristic data of patients and service users from February 2018 into our PAS system using the accepted Stonewall criteria.

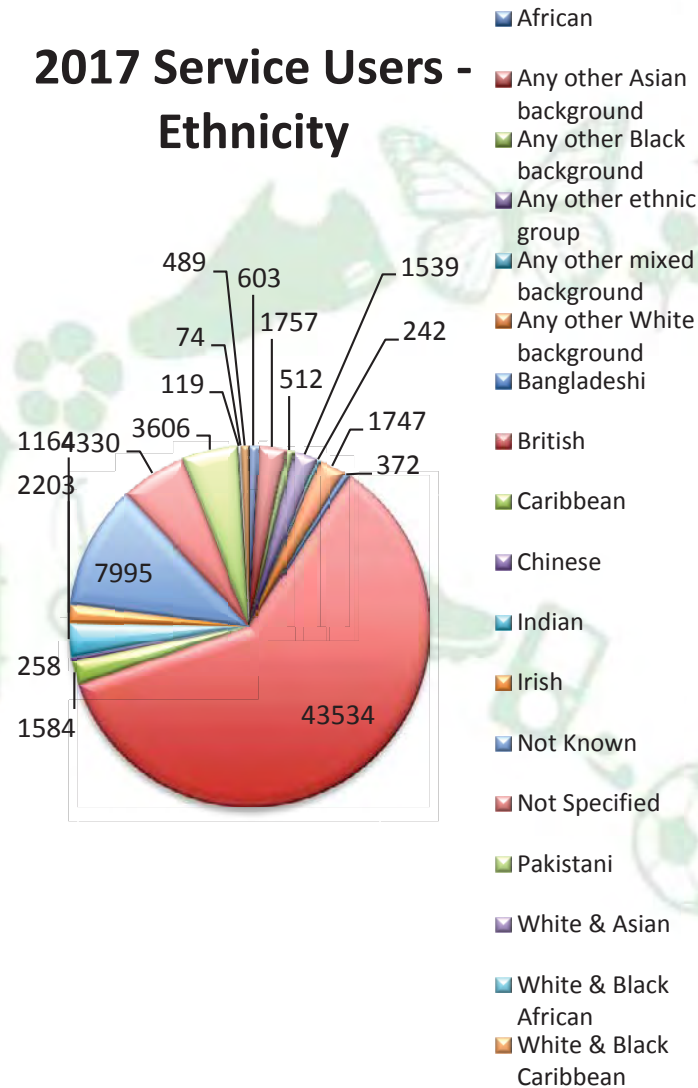
We will combine the *'Whats it got to do with you?'* data cleanse staff campaign with raising awareness of collecting monitoring information for patients and service users. We are conscious of the challenge of preparing staff for asking some of the more sensitive questions, such as relating to a person's sexual orientation. We will support the introduction of the new system with training to support staff.

# Service User Data – Ethnicity

In 2017, 62% of our service users were White British or Irish. 17% of our service users did not declare their ethnicity. 21% of our service users were BAME. This is significantly lower than the population of Birmingham, and lower than that of our workforce.

The 2011 Census indicated 53% of the Birmingham population is from a White British ethnic origin and 47% from BAME. This suggests our service users are under representative of the local BAME population.

**2017 Service Users - Ethnicity**



Ethnicity	Total	%
African	603	0.84%
Any other Asian background	1757	2.44%
Any other Black background	512	0.71%
Any other ethnic group	1539	2.13%
Any other mixed background	242	0.34%
Any other White background	1747	2.42%
Bangladeshi	372	0.52%
British	43534	60.36%
Caribbean	1584	2.20%
Chinese	258	0.36%
Indian	2203	3.05%
Irish	1164	1.61%
Not Known	7995	11.08%
Not Specified	4330	6.00%
Pakistani	3606	5.00%
White & Asian	119	0.16%
White & Black African	74	0.10%
White & Black Caribbean	489	0.68%
<b>Total</b>	<b>72128</b>	<b>100.00%</b>



# Service User Data – Gender

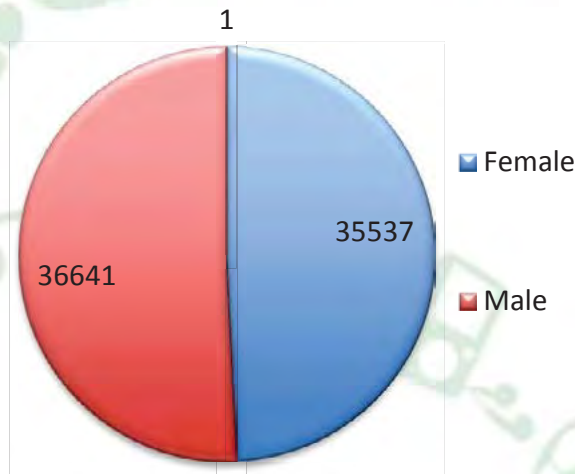


In 2017, 49% of our service users were female, and 51% of our service users were male. This is an even split between the two genders.

The 2011 Census indicated 51% of the Birmingham population was female and 49% male. This suggests our service users are representative of the local population.

From February 2018, we will be able to record all protected characteristic data of patients and service users into our PAS system using the accepted Stonewall criteria. During 2017, we were able to record our first transgender patient into our PAS system.

**2017 Service Users - Gender**



Gender	Total	%
Female	35537	49.23%
Male	36641	50.76%
Not Specified (Indeterminate)	1	0.00%
<b>Total</b>	<b>72179</b>	<b>100.00%</b>

# Service User Data – Age

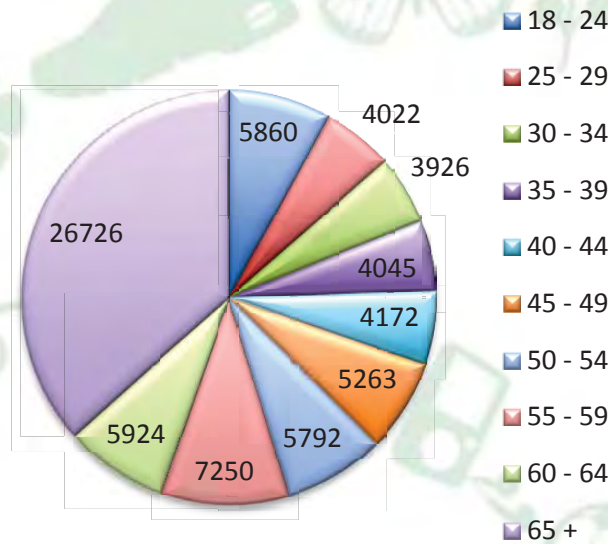


In 2017, our largest age group was those aged 65+, with over a third of patients falling into this age category. The rest of our service users were fairly evenly split across other age ranges.

The 2011 Census indicated that there were around 138,000 people aged 65 and over living in Birmingham. The number of people aged 90 and over had also increased by 18.5%, with very elderly men showing an increase of 54.5% since the last census.

With an aging population, it is likely that this will be reflected in our service user data, particularly with elderly people living longer and with more complex health needs than previously seen.

**2017 Service Users - Age**



Age Range	Total	%
18 - 24	5860	8.03%
25 - 29	4022	5.51%
30 - 34	3926	5.38%
35 - 39	4045	5.54%
40 - 44	4172	5.72%
45 - 49	5263	7.21%
50 - 54	5792	7.94%
55 - 59	7250	9.93%
60 - 64	5924	8.12%
65 +	26726	36.62%
<b>Total</b>	<b>72980</b>	<b>100.00%</b>



# Service User Data – Religion



In 2017, 80 different religions were recorded for our service users. The most common religion was Christianity, with around 30% of service users, and many different denominations.

46% of our service users did not disclose their religion or belief.

Religious Beliefs	Total	%
Agnostic	821	1.22%
Anglican	67	0.10%
Animism	3	0.00%
Atheist	1267	1.89%
Baha'I	16	0.02%
Baptist	173	0.26%
Brethren	2	0.00%
Buddhist	75	0.11%
Bulgarian Orthodox	1	0.00%
Celtic Orthodox Christian	1	0.00%
Christadelphian	24	0.04%
Christian	9032	13.45%
Church in Wales	12	0.02%
Church of England	10423	15.53%
Church of God of Prophecy	7	0.01%
Church of Ireland	30	0.04%
Church of Jesus Christ of Latter Day Saints (Mormons)	15	0.02%
Church of Scotland	73	0.11%
Coptic Orthodox	1	0.00%
Declined to Give	781	1.16%
Druid	1	0.00%
Evangelical Christian	5	0.01%
Free Evangelical Presbyterian	1	0.00%
Greek Catholic	1	0.00%
Greek Orthodox	1	0.00%
Heathen	1	0.00%
Hindu	648	0.97%
Humanist	11	0.02%
Indian Orthodox	2	0.00%
Jain	13	0.02%
Jehovah's Witness	142	0.21%
Jew	2	0.00%
Jewish	121	0.18%
Kabbalist	1	0.00%
Lutheran	5	0.01%
Mennonite	1	0.00%
Messianic Judaism	1	0.00%
Methodist	338	0.50%
Muslim	4496	6.70%
Native American Religion	6	0.01%

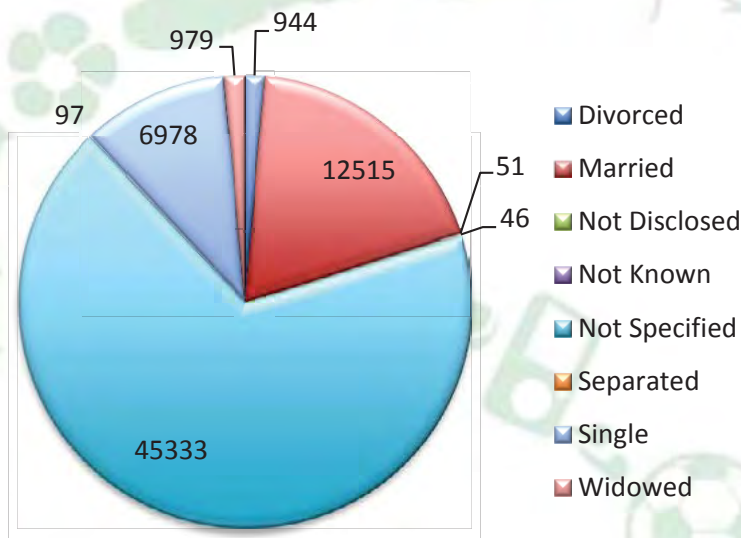
Nazarene Church	1	0.00%
New Testament Pentacostalist	1	0.00%
Nichiren Buddhist	1	0.00%
Nonconformist	6	0.01%
None	372	0.55%
Not Specified	49	0.07%
Old Catholic	4	0.01%
Open Brethren	2	0.00%
Orthodox	91	0.14%
Orthodox Jew	3	0.00%
Other Religions	91	0.14%
Pagan	25	0.04%
Pantheist	1	0.00%
Pentecostal	3	0.00%
Pentecostalist	117	0.17%
Peyotist	1	0.00%
Presbyterian	6	0.01%
Protestant	15	0.02%
Quaker	18	0.03%
Rastafarian	18	0.03%
Roman Catholic	5251	7.82%
Romanian Orthodox	5	0.01%
Salvation Army	5	0.01%
Scientology	1	0.00%
Serbian Orthodox	3	0.00%
Seventh Day Adventist	31	0.05%
Shakti Hindu	1	0.00%
Shamanism	2	0.00%
Shiite (Islam)	206	0.31%
Shinto	3	0.00%
Shumei	1	0.00%
Sikh	1001	1.49%
Spiritualist	35	0.05%
Syrian Orthodox	1	0.00%
Ukrainian Catholic	1	0.00%
Unitarian	1	0.00%
United Reformed Church	7	0.01%
Unknown	31126	46.36%
Wicca	5	0.01%
Zoroastrainism	4	0.01%
<b>Total</b>	<b>67136</b>	<b>100.00%</b>

# Service User Data – Marital Status



## 2017 Service Users - Marital Status

In 2017, 68% of service users did not specify their marital status. 19% of service users were married and 10% single. 1% were divorced, and 1% widowed.



Marital Status	Total	%
Divorced	944	1.41%
Married	12515	18.70%
Not Disclosed	51	0.08%
Not Known	46	0.07%
Not Specified	45333	67.72%
Separated	97	0.14%
Single	6978	10.42%
Widowed	979	1.46%
<b>Total</b>	<b>66943</b>	<b>100.00%</b>

# 5. What Next?



# Priorities for 2018



## Staff:

- Increase self reporting across all of the protected characteristics but in particular faith, sexuality and disability.
- To launch LGBT, BAME and Disability staff networks and merge these staff networks with those at Heart of England FT post merger
- Address any issues arising from the WDES
- Define common inclusion priorities across newly formed trust
- Have representation at Birmingham Pride

## Service Users:

- Look to identify improved communication for deaf and hard of hearing service users
- Identify a changing places facility at UHB
- Develop further 'neutral places' for at risk groups
- Ensure training is rolled out to support recording of all protected characteristics on patient systems