



Annual Equality Report 2010

The Annual Report for 2010 provides a review of the past year with regards to Equality and Diversity activity within the Trust with reference to relevant Community, Patient and Staff Demographics.

This report will be published on the Trusts Website and Intranet and will form part of the Trusts on going commitment to value and embrace equality and diversity to enhance our patient experiences at the Trust.

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Introduction

The Nuffield Orthopaedic Centre NHS Trust (NOC) is an internationally recognised centre of excellence, providing routine and specialist orthopaedic, rheumatological and neuro-rehabilitation services to the people of Oxfordshire and from across the UK and abroad. Such as the treatment of bone infection and bone tumours, and the rehabilitation of those with limb amputation or congenital deficiency, and those with neurological disabilities are provided for patients from across the UK and abroad.

The NOC maintains a distinguished medical and nursing tradition since its beginning in 1872. The tradition of clinical excellence and a reputation for first class patient care continues today with a team of dedicated staff and consultants working together to put the care and needs of our patients first. We are an innovative and friendly hospital providing routine procedures and a wide range of specialist services.

Managing equality and diversity is core to how the Trust operates to delivering clinical care that is patient centred. Equality is about recognising that every human being has a basic right to fair and equitable treatment based on their individual need. By adhering to this ethos we commit to being a first class service provider, meeting the changing needs of our community and responding to change in a timely and appropriate fashion.

The Single Equality and Human Rights Scheme (SEHRS) is our continuing commitment to Equality, Diversity and Human Rights for our staff patients and the wider community that we serve. It sets out our approach to maintaining equality, diversity and human rights within the structure of the organisation, with key equality aims that will be taken forward corporately. We will attract and retain the most creative and committed staff, harnessing productivity to deliver excellent patient care through a diverse workforce that is representative of both our community and patients.

Over the past 12 months, the profile of equality and diversity has been raised through the continued promotion of Equality and Diversity, the Black and Minority Ethnic (BME) Leadership Programme, Breaking Through Conference and the launch of the NOC Values.

Our Mission, Vision and Values

Our Mission

To relieve pain and suffering caused by long-term or disabling bone, joint or neurological conditions.

Our Vision

To be the leading provider in the country of expertise in Musculoskeletal diseases and neuro-rehabilitation. We aspire to deliver exceptional clinical outcomes, exceptional levels of patient satisfaction, and innovative world-ranking research, teaching and training.

Our Values

Respect & Compassion

- We respond with humanity and kindness, caring for patients as individuals
- We value openness and integrity in all aspects of the care we deliver
- We value cultural diversity and respect everyone's aspirations and commitments in life

Quality of Care

- We value the trust that people place in us to provide the highest levels of patient care and safety
- We value high quality and professional healthcare service that makes best use of our resources and skills for the benefit of our patients

Innovation and Learning

- We value teaching and training and will invest in the education of our staff
- We value our tradition of excellence through innovation, supporting research into new developments and techniques to benefit clinical practice.
- We will strive for continuous improvement through effective service transformation

Engagement and Participation

- We value our patients' views and seek to involve them in decisions that affect them.
- We will meet the diverse needs of our patients, their carers and our other stakeholders by ensuring equitable access to our services.
- We value and engage with our staff, from the daily running of the services to longer term developments.

Our Commitment to Equality and Diversity

The Nuffield Orthopaedic Centre (NOC) is committed to providing Equal Opportunities and Valuing Diversity by:

- Respecting everyone's differing aspirations and commitments in life.
- Providing a safe environment for patients, their visitors and our staff where discrimination of any type will not be tolerated.
- Ensuring that vulnerable people including children and adults have equal rights to protection and the Trust will endeavour to prevent any foreseeable harm and act upon any suspicions of harm or neglect in accordance with safeguarding policies.
- Striving to provide an environment in which people want to work. Enabling each member of staff to reach their full potential in a culture characterised by dignity and mutual respect & one in which people enjoy working.
- Respecting privacy, dignity, confidentiality and diversity when delivering the best possible care to all our patients and/or carers
- Expecting visitors to our organisation to embrace and uphold our commitment to the achievement of equality and diversity for everyone.
- Ensuring that to the best of our ability we meet the individual needs and expectations of our patients.
- Promoting family friendly working practices
- Consulting with patients and employees, including those from minority groups about how we can improve equality of opportunity and support diversity to reduce health inequalities and improve the health of our community, patients and staff.
- Publishing the NOC's Single Equality and Human Rights Scheme and Action Plan to outline how we will improve equality of opportunity and support diversity of our patients, the local community and our staff.

Community Demographics

The local Oxfordshire population, and that of Thames Valley, is relatively affluent and relatively healthy. Oxfordshire's population is estimated at 632,000 and is projected to grow by 2.8% over the next five years.

Longer range projections suggest that there will be a very significant increase in the numbers of older people. The population aged 85 and over is forecast to increase by 85% to 25,800 between 2008 and 2029, and the number of people between 65 and 84 is forecast to grow by 48% to 121,800. It is expected that West Oxfordshire and the Vale will see highest growth i.e. much of the growth in numbers of very elderly people will be in rural areas.

The proportion of the population from a Black and Minority Ethnic (BME) background in 2006 was on average 7.7%. This conceals a variation from 1.6% in rural South Oxfordshire to 16.6% in Oxford itself.

Patient Demographics

The high proportion of specialist work that is carried out at the NOC means that a comparatively high percentage (26%) of our patient population do not come from Oxfordshire PCTs and therefore patient demographics will not fully correlate against the local patient population. Non-Oxfordshire patients come firstly from the remainder of the traditional Oxfordshire catchments, and then from the broader south and centre of England in roughly equal measure, with many from all over the UK.

During 2009/10 the Trust has 8091 In-Patients, the most prominent patient groups are as follows:

Ethnicity	Admissions (Number)	(%)
British White	7509	92.81%
Other White	231	2.86%
Mixed	37	0.46%
Caribbean Black	29	0.36%
Other Black	57	0.70%
Indian	62	0.77%
Pakistani	39	0.48%
Other Asian	36	0.44%
Chinese	29	0.36%
Other	62	0.77%
Total	8091	100%

The 2009 In Patient Survey confirmed that 98% of patients confirmed that they felt that their privacy and dignity was respected.

Staff Demographics

For the purposes of reporting the all data is over a 12 month period to 31st August 2010 unless stated otherwise.

Ethnic Profile

The majority of the Trust's workforce (approximately 83%) is derived from a White British background. When considering this against the fact that 90% of the Oxfordshire population is of 'White British' ethnicity (according to 2001 census) this demonstrates the Trust's ethnicity profile is more diverse than the local population served.'

Any other White background' continues to be the second largest ethnicity covering dominations such as Polish and European. In terms of black and minority ethnic there has been a slight but significant increase in the number of staff employed from ethnic categories Indian and Black. Overall since the last audit, the ethnicity profile of the organisation has increased steadily in favour of black and ethnic minority employees.

Ethnic Origin	Add Prof Scientific and Technical	Additional Clinical Services	Administrative and Clerical	Allied Health Professionals	Healthcare Scientists	Medical and Dental	Nursing and Midwifery Registered	TOTAL
0 White	0	1	0	0	0	0	0	1
A White - British	38	116	186	131	22	71	144	708
B White - Irish	1	1	2	3	0	2	1	10
C White - Any other White background	0	14	20	7	2	14	23	80
D Mixed - White & Black Caribbean	1	1	3	0	0	0	0	5
F Mixed - White & Asian	1	0	2	0	0	1	0	4
G Mixed - Any other mixed background	0	1	2	0	0	0	1	4
H Asian or Asian British - Indian	0	1	4	1	0	4	10	20
J Asian or Asian British - Pakistani	0	0	2	1	3	4	1	11
L Asian or Asian British - Any other Asian background	0	3	0	3	0	2	19	27
M Black or Black British - Caribbean	0	3	3	1	1	0	7	15
N Black or Black British - African	0	7	0	0	1	4	21	33
P Black or Black British - Any other Black background	0	1	0	0	0	1	1	3
R Chinese	0	3	0	0	0	1	2	6
S Any Other Ethnic Group	0	6	2	2	0	2	10	22
Z Not Stated	0	3	0	1	0	0	1	5
TOTAL	41	161	226	150	29	106	241	954

Average Age by Staff Group

As of August 2010 the average age of an employee at the Trust is 42 years old and is fairly consistent across all staffing groups as outlined below. While 76% of the workforce were female and 24% were male.

Staff Group	Add Prof Scientific and Technical	Additional Clinical Services	Administrative and Clerical	Allied Health Professionals	Healthcare Scientists	Medical and Dental	Nursing and Midwifery Registered	Exec Directors
Average Age 2010	47	43	43	37	40	40	43	48

Leavers by Ethnicity

Overall during the reporting period 233 staff left the organisation 73% of white origin and 23% from a minority ethnic background and the remained were undisclosed. In the main this was reflective of the organisations population.

Employee Disability Analysis

As of August 2010 approximately 1% of the Trust's workforce has indicated that they have a disability.

Disabled	
No	759
Undefined	168
Yes	11

Employment Relations Activity *(Disciplinary, grievance, capability and bullying and harassment cases).*

Employment relations activity at the NOC is traditionally low. There have been 9 formal cases:

Employee Relations Case Types	No	Ethnicity
Disciplinary Cases	5	4 BME 1 White Background
Performance Cases	2	2 White Background
Grievance Cases	0	N/a
Bullying and Harassment Cases	2	2 White Background

Recruitment

The recent promotion of the BME leadership development programme was developed as a response to reviewing the ethnicity of our staff and appointments made at senior levels against our wider population. This programme was developed to enable the NOC to harness and grow its own BME talent and enabling our BME staff to progress to senior management levels within the NOC.

Overall 68% of staff were recruited from a white background, 27% from a BME background and remained undisclosed. The NOC staff profile continues to represent a diverse profile.

Recruitment Staff Group	Applications		Starters	
	Number	%	Headcount	% of total starters
WHITE - British	417	44%	83	68%
WHITE - Irish	19	2%	0	0%
WHITE - Any other white background	96	10%	0	0%
ASIAN or ASIAN BRITISH - Indian	136	14%	5	4%
ASIAN or ASIAN BRITISH - Pakistani	34	4%	4	3%
ASIAN or ASIAN BRITISH - Bangladeshi	9	1%	0	0%
ASIAN or ASIAN BRITISH - Any other Asian background	60	6%	0	0%
MIXED - White & Black Caribbean	0	0%	0	0%
MIXED - White & Black African	5	1%	0	0%
MIXED - White & Asian	6	1%	1	1%
MIXED - any other mixed background	8	1%	1	1%
BLACK or BLACK BRITISH - Caribbean	12	1%	1	1%
BLACK or BLACK BRITISH - African	88	9%	8	7%
BLACK or BLACK BRITISH - Any other black background	7	1%	1	1%
OTHER ETHNIC GROUP - Chinese	11	1%	1	1%
OTHER ETHNIC GROUP - Any other ethnic group	19	2%	10	8%
Undisclosed	13	1%	6	5%
TOTAL	940	100%	121	100%

Learning and Development

During the past 12 months the trust had 5923 training attends from the in-house CPD development programmes and mandatory and statutory training.

Ethnicity	White (All)	CP White Polish	F Mixed - White & Asian	H Asian or Asian British - Indian	J Asian or Asian British - Pakistani	L Asian or Asian British - Any other Asian background	M Black or Black British - Caribbean	N Black or Black British - African	S Any Other Ethnic Group	SC Filipino	Undefined	Z Not Stated	Total
% Attendance	78%	1%	1%	2%	1%	3%	2%	4%	1%	2%	2%	3%	100%

Overall 83% of the workforce is from a 'white' background, training attends from this group represents 78% of all attends. While 17% of the workforce is from a BME background and represented 17% of training attends. Overall the uptake of learning and development is equally accessed across all ethnic staff groups.

Single Equality Scheme

The NOC's Single Equality and Human Rights Scheme incorporates the previously existing schemes for Disability, Gender and Race and is committed to all of these strands as a basic human right. We aim to recognise the diversity of both our community and our workforce and to use this knowledge to continually ensure that our services are fit for purpose meet the needs of all those we serve. This has been updated during 2010 to reflect changes in legislation, NHS Operating frameworks and the wider community.

Managing equality and diversity is core to how the Trust operates. Our Equality and Diversity Steering Group ensures that we are committed to delivering the Single Equality Scheme which includes:

- Providing greater ease of access to our services for patients and the community.
- Attracting and retaining the most creative and committed staff and harnessing productivity to deliver excellent patient care
- Embrace our moral and legal obligations

The Single Equality and Human Rights Scheme (SEHRS) is our continuing commitment to Equality, Diversity and Human Rights for our staff patients and the wider community that we serve. It sets out our approach to maintaining equality, diversity and human rights within the structure of the organisation, with key equality aims that will be taken forward corporately.

This SEHRS has benefited from a range of stakeholders, including the Public Patient Involvement Group (PPI) and the Equality and Diversity Steering Group as well as input from the patient and staff surveys.

The NOC SEHRS action plan can be found in Appendix 1

Trust Equality and Diversity Group

The Trust Equality and Diversity Group was first established in 2006 to ensure that Equality and Diversity initiatives were integrated into all parts of the organisation and that the Equality and Diversity agenda was developed and incorporated into future planning. The Trust Equality and Diversity Group is also tasked to ensure that the Trust is focused on delivering on all parts of the Diversity and Equality agenda that meet legal requirements and healthcare standards.

Overall Purpose

The group will have the responsibility to promote a climate at the NOC where we actively recognise, respect and value the benefits of difference and embed equal opportunities into the culture and organisation, into employment practice and into the way services are delivered to our patients and members of the public. This is achieved by:

- Continuing to communicate the Trust's commitment and intention to promote equality, value diversity and respect human rights to the population we serve, our partners, the wider community, patients and staff.
- Monitoring and evaluating the effectiveness of the Single Equality Scheme to Ensure the Trust acts in a way that is compatible with the Human Rights Act when devising policies or procedures or delivering services directly to the public. To continue to build on our achievement since the inception of the Equality and Diversity and Race Equality Scheme, and progress any development areas identified.
- Ensuring the Trust meets its responsibilities under national and local policies, such as the Care Quality Commission Standards for Better Health, other national initiatives, Patient and Public Involvement (PPI Strategy), the Trust's Workforce and Organisational Development Strategy and operational service plans.
- Ensuring that there are arrangements for an on-going programme of mandatory diversity awareness training for staff and that this is monitored on a regular basis.

- Monitoring and reviewing workforce data, patient and service user feedback in relation to equality & diversity to ensure our workforce profile matches that of the wider community and supports patient care.
- Ensuring that Equality Impact Assessments (EIA) on Trust policies, procedures and service developments are undertaken.

Key Equality & Diversity Developments at the NOC

Over the past 12 months the NOC has continued to demonstrate its commitment to promoting and valuing equality and diversity in the workplace, specific developments including:

BME Talent

The BME leadership development programme was developed as a response to reviewing the ethnicity of our staff and appointments made at senior levels against our wider population. This programme was developed to enable the NOC to harness and grow its own BME talent and enabling our BME staff to progress to senior management levels within the NOC and continue to enhance the patient experience.

A focus on developing BME talent at all levels has sent out the right message to staff, which is critical to delivering the vision of high quality care for all. This programme has been accredited by the Institute of Leadership and Management (ILM) at a level 3 in association with Bridge Training

This commitment demonstrates the Trusts forward thinking and commitment to Diversity and Equality and supports the vision that David Nicholson has to see more BME staff in his top 200 managers.

The course resulted in:

- 100% pass rate of assessments achieving ILM level 3 Leadership
- Growing the BME talent pool
- Positive feedback from delegates:
 - o It has increased my self awareness
 - o I will really recommend this course to all other staff.
 - o I feel very proud because at the beginning it felt like, it was impossible to comprehend what you were saying to us

Safeguarding

The NOC has worked closely with the Oxfordshire Safeguarding Boards (Adults and Children). This has led to the development of a suite of internal training programmes with defined competencies being developed. Internal trainers have been trained to deliver the programmes, of which over 75% of frontline staff have attended to support safeguard vulnerable adult and protect children in our care.

Feedback from delegates includes:

- "Vital for the protection of vulnerable adults"
- "It makes you think"
- "An excellent and well presented course"

Building in Equality and Diversity

At the NOC we have taken the approach of integrating Equality and Diversity into all that we do. This has been done in a number of ways.

During 2010 the NOC in consultation with staff and patients developed a set of values that is local to the NOC, but aligned to the wider NHS. Within the values we have made the commitment to:

- Respond with humanity and kindness, caring for patients as individuals
- We value openness and integrity in all aspects of the care we deliver
- We value cultural diversity and respect everyone's aspirations and commitments in life

These values have been integrated into our leadership development through the successful pilot of the 360 degree review process for managers, which is now being rolled out across the service to embed our values into our daily management practices. While all new starts receive introductory training to Equality and Diversity within the corporate induction.

Updated SEHRS Plan 2010-2013

The NOC has updated and aligned its SEHRS plan with the wider NHS South Central SEHRS plan and forms part of the NOCs Workforce and Organisational Development Strategy. This Strategy supports the NOC vision and aims to develop a fully engaged workforce by creating conditions for our people to succeed by:

- Harnessing the 'NOC Community Spirit' (Employee Engagement, E&D and Organisational Values)
- Investing in 'Transformational Leadership' (Investment in Clinical Leadership, Talent Management and 360 appraisal)
- Developing a system to create 'Total Reward' (Pensions Choice, Attendance Management, Health and Wellbeing and Partnership Working)
- Achieving 'Excellence in Workforce Innovation' (Learning and Development, Innovation, Safe working practices)

Public and Patient Involvement

Public and patient engagement is core delivering services that are patient focused. This is done through internally managed groups as well as participating on external groups. Examples include:

- NOC Network
- HALT (Homophobic Awareness Liaison Team)
- Patient Liaison Group
- PPI
- Work Experience Programme

The NOC Network is for patient, carer and public involvement. The NOC Network is made up of a Steering Group, which provides a readily accessible point of contact for everyone, and a wider membership of individuals who sit on a number of user groups, examples include patient information and feedback, website and communications, research, and equality and diversity.

HALT is a community initiative to create a safer community for lesbian, gay, bisexual and transgender (LGBT) people in Oxfordshire. The group consists of representatives from Oxford's LGBT community, Thames Valley Police, Oxfordshire district and county councils, NHS organisations including the Nuffield Orthopaedic Centre and the Terence Higgins Trust.

The Work Experience Programme at the NOC is open to students aged sixteen years and over who wish to experience what it is like to work in an acute hospital trust. The placements are designed to help students in making decisions about a future career by giving an insight to the activities undertaken within the NHS. This includes promoting the importance of diversity in terms of patient need and choice e.g. Religion, Ethnicity, Sexual Orientation, Disability, Age, Gender and allowing students to experience multi-disciplinary team working and understand its place in the treatment of patients.

NOC Single Equalities and Human Rights SEHRS (ACTION PLAN) 2010-2013

Objective 1 Clear Leadership, Corporate Commitment and Governance

Ref:	Action	Measure of Success	Lead Officer	Timescales	Equality Focus	Human Rights
1.1	To review and replace the Trust's current SEHRS and Equality and Diversity strategy based on current feedback and legislative change	Sign off revised 3-year Single Equality and Human Rights Scheme	Head of OD and Learning	Oct 2010	All Equality Strands	Right not to be discriminated against
1.2	Review SEHRS plan against CQC standards	Ensure that the SEHRS plan meets the regulatory requirements if the CQC	Head of OD and Learning	Annual Review	All Equality Strands	Right not to be discriminated against
1.3	Ensure that Equality and Diversity is integrated into the Trusts business planning processes	E&D is a core part of the organisations business planning processes	Director of Workforce and Organisational Development	2010-2013	All Equality Strands	Right not to be discriminated against
1.4	Ensure that the NOC is represented at a regional E&D level	Ensuring that the NOCs SEHRS supports a consistent approach across south central and maximises on the shared resources available	Head of OD and Learning	2010-2013	All Equality Strands	Right not to be discriminated against
1.5	Executive Directors act as champions for E&D and Human Rights (Living our Values)	E&D and Human rights are lived daily within the organisation	Director of Workforce and Organisational Development	2010-2013	All Equality Strands	Right not to be discriminated against

Objective 2 Equality Impact Assessments

Ref:	Action	Measure of Success	Lead Officer	Timescales	Equality Focus	Human Rights
2.1	<p>Ensure that all new policies are EQIAd</p> <p>Provide a plan of what policies still require an EQIA and a plan of when they will be complete</p>	<p>All policies do not discriminate and are fair for all staff</p> <p>All policies have an EQIA</p>	<p>Head of Safety, Quality and Standards</p>	<p>2010-2013</p> <p>2010</p>	All Equality Strands	Right not to be discriminated against
	<p>Where a negative impact has been identified (as part of an EQIA) this should be flagged to the IGC along with actions to mitigate any discrimination</p>	<p>All services do not discriminate and are fair for all potential patients</p>	<p>Individual proposer of policy or business case</p>	2010-2013	All Equality Strands	Right not to be discriminated against
2.2	<p>All service developments are subject to an EQIA as part of the business planning process</p>	<p>All services to not discriminate and are fair for all potential patients</p>	<p>NOC Business Case Review Group</p>	2010-2013	All Equality Strands	Right not to be discriminated against

Objective 3 Partnership Working, Consultation and Involvement

Ref:	Action	Measure of Success	Lead Officer	Timescales	Equality Focus	Human Rights
3.1	Carry out review of SEHRS action plan with stakeholders - via PPI Steering Group / Services Users and hard to reach groups	Increased awareness of SEHRS / Service understand the users perspective	Director of Workforce and OD	2010	All Equality Strands	Right not to be discriminated against
3.2	Continue to work with Oxfordshire HALT Ensure involvement with under-represented groups	Increased awareness of SEHRS / Service understand the users perspective	Head of OD and Learning	2010-2013	LGBT	Right not to be discriminated against
3.3	Review PPI Engagement Strategy building upon market research already undertaken – identifying opportunities to engage with under represented groups	Insuring equal access to services	Director of Workforce and OD	2010	All Equality Strands	Right not to be discriminated against
3.4	Ensure where equipment or services are procured through a tendering process that providers will demonstrate their compliance to equality and human rights legislation - in accordance with Department of Health guidelines and with reference to the Mosaic programme.	Effective Partnership working with shared values	Head of Procurement	2010-2013	All Equality Strands	Right not to be discriminated against

Objective 4 Accessibility and Communications

Ref:	Action	Measure of Success	Lead Officer	Timescales	Equality Focus	Human Rights
4.1	Website and Internet provide up to date information on E&D, Equality Report and the SEHRS plan Ensure that revised website and intranet complies with W3C, Shas Trust, RNIB etc. for easy access	Stakeholders can easily gain information on Equality and Diversity at the NOC	Head of OD and Learning Head of Communications	2010-2013 2010	All Equality Strands Disability	Right not to be discriminated against Right not to be discriminated against
4.2	Act on information from staff/patient surveys and directorate performance KPIs.	Increased satisfaction levels from the equality target group's of people, as identified through results of staff / patients surveys.	PALs Manager/ Head of Organisational Development	2010-2011	All Equality Strands	Right not to be discriminated against
4.3	Evaluate the results of access audit and present findings to each directorate to incorporate into directorate service reviews, action plans and service plans for implementation Review access to services	To continue to comply with the appropriate legislative requirements.	Head of Estates	Annual Review	Disability	Right not to be discriminated against

4.4	Monthly report received from PALS & Complaints dept – reviewed with regard to Equality groups and issues / trends identified & addressed	To ensure that we eliminate harassment and discrimination that is unlawful under the DDA, RRAA and EA	Head of Safety Quality and Standards	2010-2013	All Equality Strands	Right not to be discriminated against
4.5	Review the CQC Paper on the Physical Health needs of people with a mental illness and people with learning disabilities to promote respect, choice, involvement; autonomy and detect adverse outcomes” Due October 2010	To ensure that we eliminate discrimination when working with patients that have mental illness and people with learning disabilities	E&D Lead	2010	Disability	Right not to be discriminated against
4.6	Review national strategy (CQC) on Dementia Due May 2010	To ensure that we eliminate discrimination when working with patients that have dementia	Adult Safeguarding Lead	2010	Disability	Right not to be discriminated against
4.7	Review 'Did not attend' rates for clinics by equality groups	To ensure that we eliminate discrimination when working with patients	PALS Manager	2010	All Equality Strands	Right not to be discriminated against

Objective 5 Workforce and Training

Ref:	Action	Measure of Success	Lead Officer	Timescales	Equality Focus	Human Rights
5.1	Provide a user perspective case study within the E&D training	Increased understanding and effectiveness of training delivered	Head of OD and Learning	2010	All Equality Strands	Right not to be discriminated against
5.2	Continue to provide E&D training at induction for all new staff Raise staff awareness on Race Equality Duty and public sector duties, human rights and employment regulations 2011 (CQC)	Staff have an awareness of E&D and treat patients as individuals (user perspective)	Head of OD and Learning	2010-2013	All Equality Strands	Right not to be discriminated against
5.3	Ensure that all frontline staff continue to receive Safeguarding Training (Children and Adults)	Appropriate protection arrangements are made where there is evidence of abuse	Trust Safeguarding Leads	2010-2013	All Equality Strands	Right not to be discriminated against
5.4	Implementation of NOC Talent Management Strategy (report by equality groups)	Diverse Talent Pool that represents the wider population	Head of OD and Learning	2010	All Equality Strands	Right not to be discriminated against
5.5	Put in systems to monitor and evaluate the effectiveness of Liberties (DOLs) and Safeguarding under the mental capacity act (CQC)	Protection of individuals liberty	Safeguarding Adult Board	2010-11	Disability	Right not to be discriminated against
5.6	Recruitment processes encourage applications from across the diversity	Applications for posts are diverse and represent the wider community	Head of HR	2013	All Equality Strands	Right not to be discriminated against

	strands (2013 CQC)							
5.7	Data validation for sexual orientation and religion and belief 2010	Compliant with data requirements and enhanced management information to update SEHRs as required	Head of HR	2010	sexual orientation religion and belief	Right not to be discriminated against		
5.8	Promote BME Talent programmes and breaking through	BME Talent Pool	Head of OD and Learning	2010	BME	Right not to be discriminated against		
5.9	(English for speakers of other languages), ESOL Training in relation to PALs data	Effective communication with English speaking patients – no complaints received	Head of OD and Learning	2010	All Equality Strands	Right not to be discriminated against		
5.10	Develop Equality Targets for under-representation and take appropriate action	The staff profile reflect that of the wider community	E&D Steering Group	2010	All Equality Strands	Right not to be discriminated against		
5.11	Ensure all staff have a PDR	All staff have equal access to support and development	Head of OD and Learning	2010-2013	All Equality Strands	Right not to be discriminated against		

Objective 6 Monitoring, Data Reporting

Ref:	Action	Measure of Success	Lead Officer	Timescales	Equality Focus	Human Rights
6.1	Review CQC provider indicators to measure how well the NOC is meeting the needs of the community (Review April 2011)	Ability to demonstrate that the NOC meets the communities needs in line with CQC standards	E&D Group	April 2011	All Equality Strands	Right not to be discriminated against
6.2	Annual Review of Staff Survey – address any E&D issues identified within the Staff Survey Action Plan	The NOC can demonstrate that it listens and takes action to user and stakeholder feedback	Head of OD and Learning	Annual	All Equality Strands	Right not to be discriminated against
6.3	Patient Survey and Complaints to updated the action plan as required (include into annual equality report)	The NOC can demonstrate that it listens and takes action to user and stakeholder feedback	Head of SQS	2010-2013	All Equality Strands	Right not to be discriminated against
6.3	Produce Annual Equalities Report to include <ul style="list-style-type: none"> - provide review against equality strands - update on SEHRs - Issues identified and action being taken - Achievements to date 	To ensure compliance with the specific duties and to ensure that the NOC does not discriminate and is fair to all for all potential service users and staff	Head of OD	Annual (July)	All Equality Strands	Right not to be discriminated against

	- Staff Survey / Patient Survey and PALS data							
6.4	Data sets for reporting (From April 2011) (CQC) Human rights indicators to measure how well providers are meeting the needs of their communities (CQC)	Head of OD	April 2011	All Equality Strands	Right not to be discriminated against			
6.5	Monthly report received from PALS & Complaints department – reviewed with regard to Equality groups and issues/trends identified and addressed	PALS	2010-2013	All Equality Strands	Right not to be discriminated against			