

Equality Delivery System

Mid Cheshire Hospitals NHS Foundation Trust

2021 - 2022

Annual report prepared by:

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Equality Delivery System

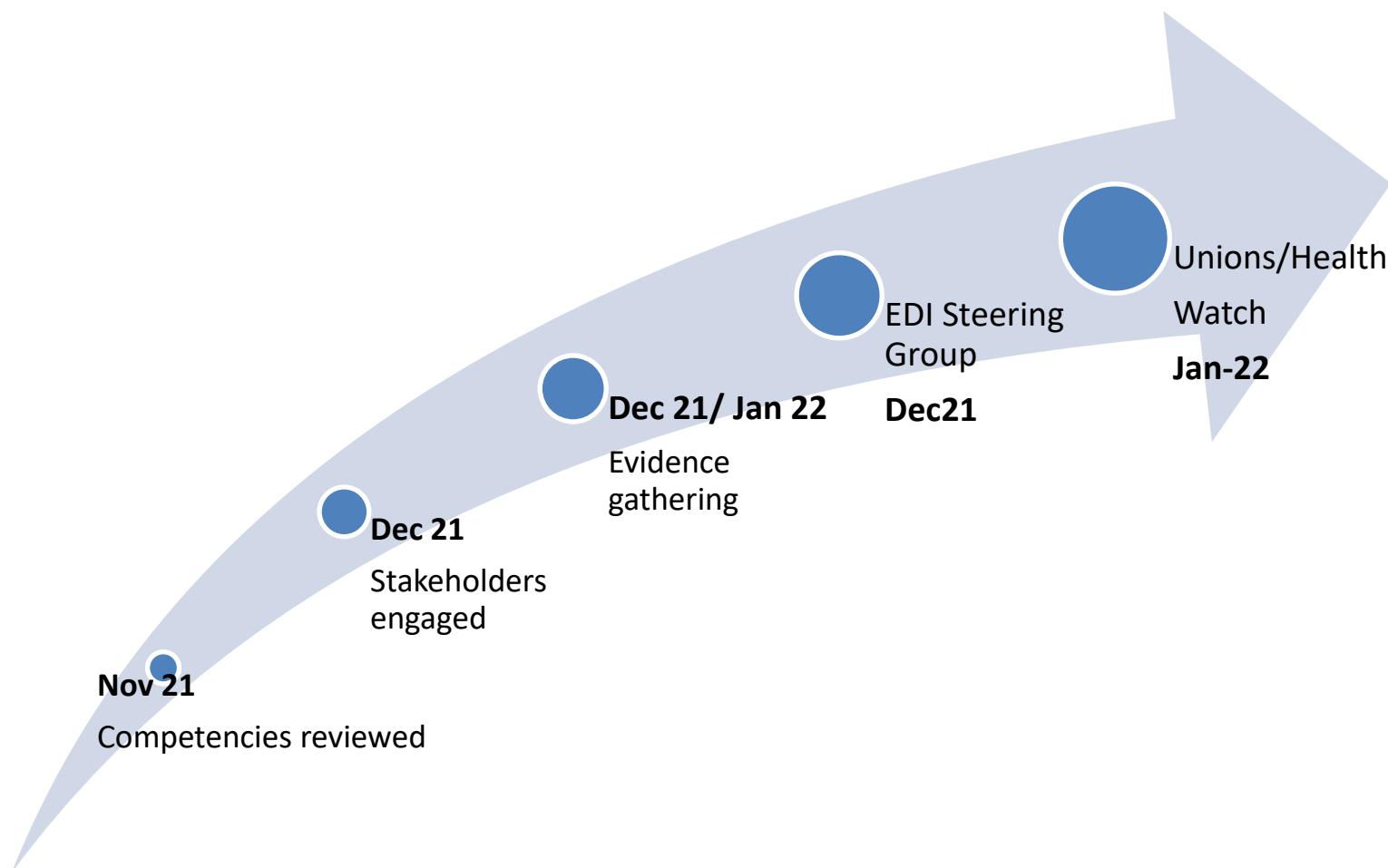
EDS What is it?

- Forms part of the trusts commitments under the Public Sector Equality Duty
Trusts provide evidence against 18 x Standards split across four goals
Patient and workforce focused
- In 2021 the trust was evaluated and a supportive overall grading of 'Achieving' was awarded following consultation and evaluation with HealthWatch. Full report published and accessible [on the Trusts website](#)
- Our 2022 submission will focus on:
 - Goal Two Improved patient experience
 - Goal Three A represented and supported workforce
- Ratings are proposed by competency but endorsed at an overall level
Undeveloped, Developing, Achieving, Excelling
- A stand alone report but content is also referenced in trusts annual Equality & Human Rights report
- **Deadline for publication – 31st March**

Goals Two & Three

Goal		Number	Description of outcome
Two	Improved Patient access and experience	2.1	People, carers and communities can readily access hospital, community health or primary care services and should not be denied access on unreasonable grounds
		2.2	People are informed and supported to be as involved as they wish to be in decisions about their care
			People report positive experiences of the NHS
		2.3	People's complaints about services are handled respectfully and efficiently
Three	A representative and supported workforce	3.1	Fair NHS recruitment and selection processes lead to a more representative workforce at all levels
		3.2	The NHS is committed to equal pay for work of equal value and expects employers to use equal pay audits to help fulfil their legal obligations
		3.3	Training and development opportunities are taken up and positively evaluated by all staff
		3.4	When at work staff are free from abuse, harassment, bullying and violence from any source
		3.5	Staff report positive experiences of their membership of the workforce.

The journey so far....



Improved Patient Access

Goal 2.1 Ready Access to hospital, community and Primary Care Services

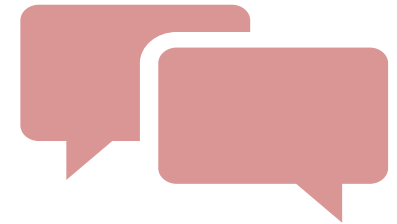


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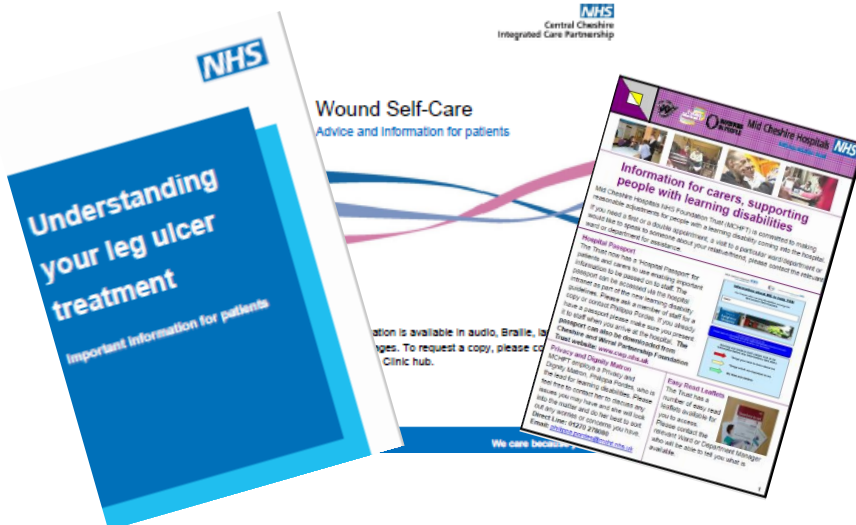


Hearing Loops Task and Finish Group:

- 14 Hearing Loops in Leighton
- 6 Hearing Loops in VIN



Patient Information



Translation Services

Cheshire and Merseyside Collaborative project.

MCHFT contracted to the successful interpreting and translation provider from 1st December 2021.

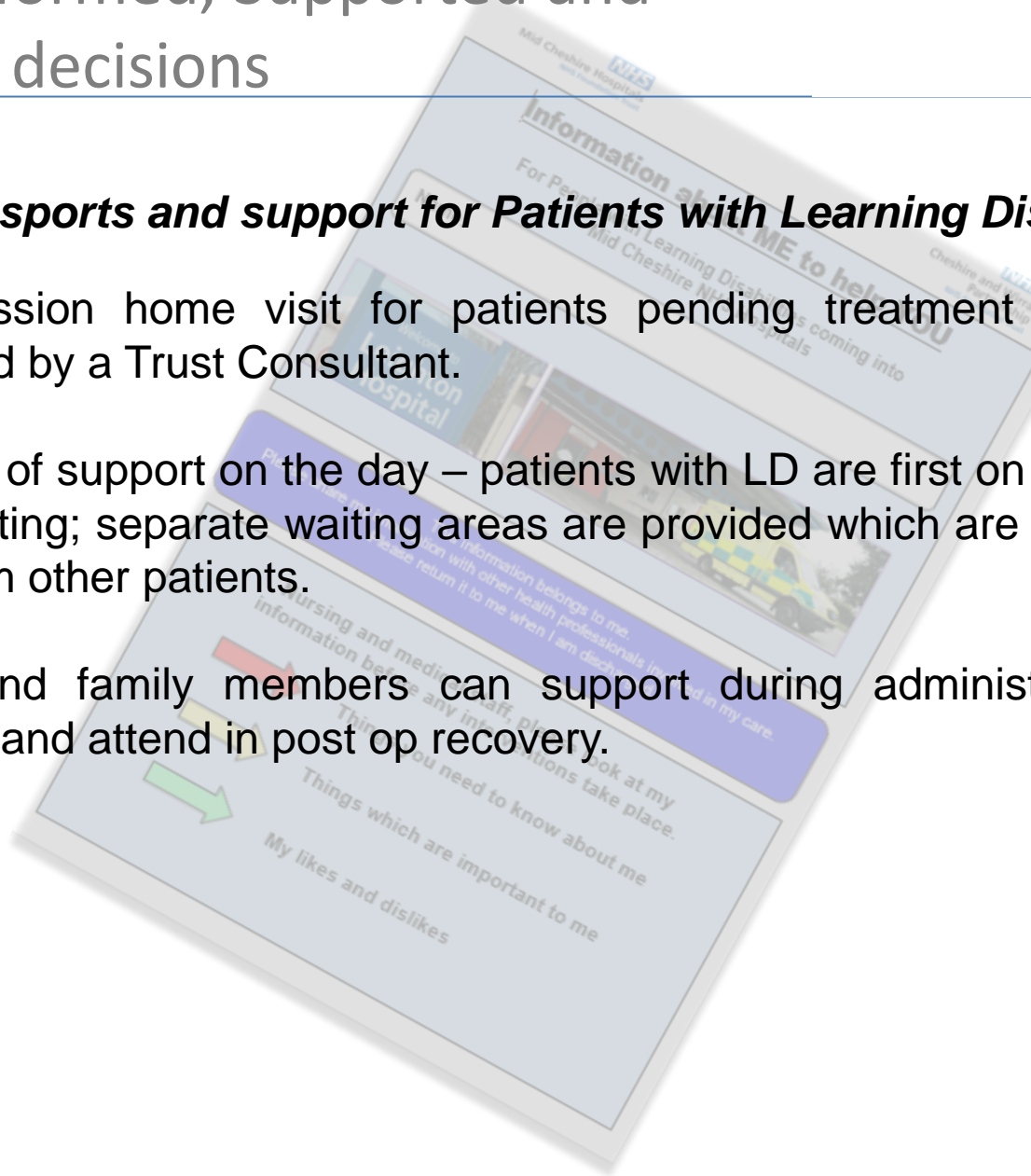
Extends services to telephone (on demand), video (on demand and booked) and face to face (booked).

Improved Patient Access

Goal 2.2 Informed, Supported and Involved in decisions

Patient Passports and support for Patients with Learning Disabilities

- Pre-admission home visit for patients pending treatment which is conducted by a Trust Consultant.
- Provision of support on the day – patients with LD are first on the list to avoid waiting; separate waiting areas are provided which are quiet and away from other patients.
- Carers and family members can support during administration of aesthetic and attend in post op recovery.



Improved Patient Access

Goal 2.2 Informed, Supported and Involved in decisions

The Patient Experience Team have been actively supporting a patient with a neurodiverse condition to ensure access to information and services.

Interventions include:

- Drafting a communication plan for the patient to confirm reasonable adjustments and to provide Trust staff with greater information around the patient's needs
- Patient Experience Team engaged directly with the patient to understand their specific needs and how the Trust can support accessing services
- Trust contacted external organisations for expert support and advice including Adult Safeguarding, CCG, HOPE network, Healthwatch Advocacy, and local Trust partners



Improved Patient Access

Goal 2.3 Positive Experiences of NHS



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The patient experience Team complete quarterly patient experience reports and provide an overview of the work carried out across the organisation:

- For Q1, 93% of respondents from the Friends and Family Feedback rated the Trust as 'very good' or 'good'.
- For Q2, 91% of respondents from the Friends and Family Feedback rated the Trust as 'very good' or 'good'.



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Improved Patient Access

Goal 2.4 Handling of Complaints



The Q1 and Q2 Patient Experience reports include Complaints and Concerns data and information.



NHS Complaints were put on hold nationally in April 2020 due to the pandemic, this affected the complaints process not the receipt of complaints.



Compliance for responses has two KPIs. KPI 1 is formal complaints closed within 40 working days (excluding RCA, COVID-19, other as applicable) and KPI 2 formal complaints acknowledged in 3 working days (no exclusions).



Complaints reinstated from 01 April 2021 and the 40 working day target was achieved (88%). Since May 2021 the target has not been achieved due to the backlog of complaints and the number and complexity of new complaints.



The backlog is still currently being addressed, with a risk assessment in place to support compliance with response times.

Improved Patient Access

Goal 2.2 Informed, Supported and Involved in decisions



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The Trust recognize that not all feedback is positive and that there will be occasions when they didn't get it right.

The Trust actively encourage these cases to be highlighted at Board level where they are discussed, and learnings identified.

A complaint was shared at Trust Board in January 2022 regarding how a terminally ill patient was communicated with by the Trust.

Reflection and learning have taken place around communication and improving the communication of difficult news and relevant learning shared at junior doctor teaching sessions.



A Representative & Supported Workforce

Goal 3.1 Recruitment and Selection



5.2% increase of men within the workforce in 2021 since 2020.



BAME Representation has increased to **9.2%** from 7.7% in 2020.

Likelihood of non-disabled staff compared to disabled staff being appointed from shortlisting decreased positively from 1.63 times more likely in 2020 to **1.34 times** more likely in 2021



A Representative & Supported Workforce

Goal 3.1



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Staff Networks



LGBT+ Network



BAME Network



Disabled and Carers Network

A Representative & Supported Workforce

Goal 3.2 Equal Pay



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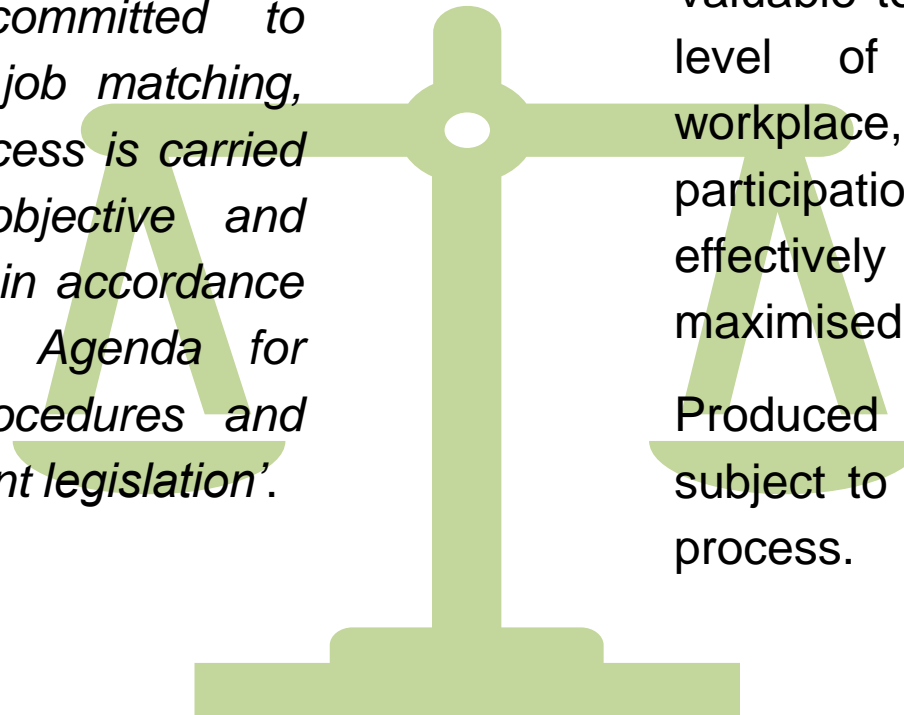
Agenda for Change

‘The Trust is committed to ensuring that the job matching, and evaluation process is carried out in a fair, objective and consistent manner in accordance with the national Agenda for Change (AfC) Procedures and protocols and current legislation’.

Gender Pay Gap

Valuable tool for assessing the level of equality in the workplace, female, and male participation and how effectively talent is being maximised.

Produced annually and is subject to a clear Governance process.



A Representative & Supported Workforce

Goal 3.3 Training and Development



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Mandatory Training is monitored monthly and reported quarterly to the Board through the Workforce Digital Transformation Committee.

Talent Development

A comprehensive OD & Learning prospectus has been developed with an open calendar of annual learning events and is accessible to all staff.

Leadership Training Courses

The opportunity for staff to attend leadership training and development is accessible to all staff. There are four key programmes live within the MCHFT Portfolio currently.

A Representative & Supported Workforce

Goal 3.4 Abuse, Harassment and Bullying

Freedom to Speak Up

The Freedom to Speak up Guardian's role is to provide staff with someone to go to if they have a concern.

- April 2021 to 30th June 2021: 7 new concerns raised
- 1st July to 13th September 2021: 9 new concerns raised
- 1st October to 31st December 2021: 9 new concerns raised

NHS Survey data showed that **70%** of staff agreed that they could speak up about anything that concerned them in the organisation.

Violence and Aggression Forum

The Trust has an approved violence reduction strategy which is monitored by the group, there are several actions linked to auditing processes.

Bullying

When an incident of Bullying is reported, it bypasses the usual route of manager, compliance manager/QGM and instead it goes straight to workforce to review.

Separate Bullying and Harassment Policy to Grievance in which allegations of Bullying and / or Harassment follows a disciplinary investigation route.

Staff Survey 2021:

- Number of staff reporting that they have not experienced bullying and abuse at work from patients, service users or members of the Public – 76.2%. (vs 77.9% in 2020) *
- Number of staff having not experienced harassment, bullying or abuse from Line Managers – 91.4% (vs 90.2% in 2020) *
- Number of staff not having experienced bullying and harassment from a colleague – 83%. (vs 84.2% in 2020) *

* Positive change

* Negative change

A Representative & Supported Workforce

Goal 3.5 Flexible Working

Flexible working is about **supporting staff to have greater choice in where, when, and how they work.**

The Flexible Working Policy was **changed from September 2021** to provide the right for all employees to make a Flexible Working Request regardless of length of service.

Employees can make **more than one flexible working request** per year and can do so regardless of the reasons for them.

The Trust's Flexible Working Policy includes **handy toolkits** to support employees and line managers to consider how flexible working could work

The Trust will also be delivering **flexible working webinars** to support managers.

A Representative & Supported Workforce

Goal 3.5 Flexible Working

Agile working was widely adopted throughout the Trusts response to the 2020 COVID19 pandemic.

This rapid adoption has allowed agile working to be tested and proven under the most extreme of circumstances.

The Trust adopted an **Agile Working Policy** in November 2020 and continues to support Agile Working through:

- Embedded working practices (virtual meetings, live training delivery and virtual training platform);
- IT solutions (home working kits and secure network connection)
- Infrastructure via Infinity House, an off-site work base which operates as a hot desk hub for corporate services and several Community services.

A Representative & Supported Workforce

Goal 3.6 Positive Experience of membership



Opportunities for Flexible Working:

54.4% of staff agreed.



Immediate Manager takes positive action on health and wellbeing:

67.5% agreed.



I would recommend my organisation as a place to work:

66.3% agreed

A Representative & Supported Workforce

Goal 3.6 Positive Experience of membership

Health and Wellbeing is a key priority for the Trust.

Director of People taking Executive level responsibility for WB in collaboration with a Non Executive Director in the form of a Wellbeing Guardian.

Trust focused on meeting the immediate needs of our people to support them through the COOVID-19 crisis;

- Delivering snacks, fruit and treats to help maintain morale as well as water to ensure colleagues remained hydrated
- Establishing 17 Wellbeing & Serenity rooms so people had an opportunity to go somewhere to relax, refuel and recharge
- Increased cohort of MHFAs' from an established team of 16 to 48
- Wellbeing Squads – a multi-disciplinary team offering a compassionate ear and signposting
- Promotion of free wellbeing apps for NHS Staff



Conclusion

Final Rating

Goal	Number	Description of outcome	Provisional rating		Endorsed rating	
			MCHT Rating		Stakeholder Group	HealthWatch
Improved Patient access and experience	2.1	People, carers and communities can readily access hospital, community health or primary care services and should not be denied access on unreasonable grounds	Achieving	Stakeholder discussion & review	Achieving	Achieving
	2.2	People are informed and supported to be as involved as they wish to be in decisions about their care	Achieving		Achieving	Achieving
	2.3	People report positive experiences of the NHS	Achieving		Achieving	Achieving
	2.4	People's complaints about services are handled respectfully and efficiently	Achieving		Achieving	Achieving
Represented and supported workforce	3.1	Fair NHS recruitment and selection processes lead to a more representative workforce at all levels	Achieving		Achieving	Achieving
	3.2	The NHS is committed to equal pay for work of equal value and expects employers to use equal pay audits to help fulfil their legal obligations	Achieving		Achieving	Achieving
	3.3	Training and development opportunities are taken up and positively evaluated by all staff	Achieving		Achieving	Achieving
	3.4	When at work staff are free from abuse , harassment , bullying and violence from any source	Achieving		Achieving	Achieving
	3.5	Staff report positive experience of their membership of the workforce	Achieving		Achieving	Achieving

Conclusion

Healthwatch Feedback



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‘For an organisation to be successful it must be inclusive and consider all employees and public contact. In being transparent and engaging with all its members and working with others like Healthwatch Cheshire gaps can be identified and addressed.

This is why Healthwatch Cheshire are pleased to have been involved with the Trust and in working together to ensure that this Equality and Diversity Assessment recognises the effective good practice that exists. That is why I can endorse the recommendation to award ACHIEVING’.

David Crosthwaite, Healthwatch