Report update
Equality & Diversity Report 2021/22
The Royal Orthopaedic Hospital

EQUALITY & DIVERSITY

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Appendix 1

Summary

This Equality and Diversity report gives an overview of key information and achievements in line with the ROH Inclusion strategy and action plan for 2021/2022.

There is a requirement for every NHS organisation to compile and publish information linked to Equality and Diversity for colleagues and patients in the form of an annual report. This document will be published on the ROH website alongside other equality and diversity documents.

In 2021/21 key areas to note are:

- Significant progress has been made to hear colleague voice through the development of the staff networks particularly for the Multi Minority Ethnic Group (MMEG) network and the BeMyself group. This engagement has led to some positive projects being delivered in 2021/22 including the 'Beyond the Stigma' exhibition and working with regional colleagues on the first regional LGBTQ conference

- The Freedom to Speak up (FTSU) Guardian has continued to recruit and develop a network of FTSU champions to help embed a culture of openness and speaking up. This work is reported back to the National Guardian's office – Freedom to Speak up

- The AccessAble project was implemented at the Trust which allow patients and visitors with both visible and hidden disabilities to review up to date useful information for the hospital site e.g. ramps, sound levels in restaurants and changing facilities

- The Trust was highlighted by NHS England in top ten best performing NHS Trusts for work on the Workforce Race Equality Standard (WRES) around Indicator 5 link to managing bullying and harassment

- The Trust has continued to be recognised for the progress on their Inclusion journey with a ranking of 15 in the Inclusive Top 50 UK Employers in the UK 2021 and achieving Level 3 Disability Confident Employer accreditation

- The staff survey results 2021 have highlighted that the Trust has maintained the previous engagement score which concentrates on 'how it feels to work at the ROH'

- Work must continue to promote equal opportunities for all staff members. The workforce data in this report highlights the difference in representation across our diverse groups. The Trust is aware from colleague feedback that diversity in some areas is impacting the experience of individuals at the Trust. With support from the staff networks and colleague listening sessions, Trust will continue to implement OD and Inclusion programmes to close these inequality gaps.

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Glossary

- Access Information Standard (AIS)
- Black, Asian and Minority Ethnic (BAME)
- Black & Minority Ethnic (BME)
- Birmingham Race Action Partnership (BRAP)
- British Medical Association (BMA)
- Care Quality Commission (CQC)
- Chartered Institute of Personnel and Development (CIPD)
- Clinical Commissioning Groups (CCG)
- Equality Delivery System (EDS)
- Equality & Diversity (E&D)
- Enabling a Productive & Inclusive Culture (EPIC)
- Learning Disability (LD)
- Lesbian, Gay, Bisexual, Transgender & Queer (LGBTQ+)
- Managed Service Provider (MSP)
- Multi Minority Ethnic Group (MMEG)
- National Staff survey (NSS)
- NHS Employers/Improvement (NHS/I)
- Royal Orthopaedic Hospital (ROH)
- Staff Experience & Organisational Development (SE&OD)
- Sustainability and Transformation Partnership (STP)
- Very Senior Manager (VSM)
- Workforce Disability Equality Standard (WDES)
- Workforce Race Equality Standard (WRES)

Links

- AccessAble https://www.accessable.co.uk/
- British Medical Association (BMA) https://www.bma.org.uk/
- Chartered Institute of Personnel and Development https://www.cipd.co.uk/#gref
- Disability Confident Employer https://disabilityconfident.campaign.gov.uk/
- Diverse Inclusive Together https://www.nhsemployers.org/EDI
- Inclusive Companies https://www.inclusivecompanies.co.uk/
- The Point of Care Foundation https://www.pointofcarefoundation.org.uk/
- Royal College of Nursing https://www.rcn.org.uk/
- Schwartz Rounds https://www.pointofcarefoundation.org.uk/our-programmes/schwartz-rounds/
- Stonewall https://www.stonewall.org.uk/
- Unison https://join.unison.org.uk/

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Equality and Diversity at the Royal Orthopaedic Hospital

Strategy

The Trust

The Trust has been at the forefront of orthopaedic care, pioneering new surgical techniques and advancing treatment for people with bone and joint disorders from across the world. That heritage of innovation and excellence still drives the Trust today as boundaries continue to be pushed to deliver the best care possible.

Introduction on Equality and Diversity at ROH

Led by the Trust Board, the Royal Orthopaedic Hospital (ROH) is committed to ensuring equality, diversity and human rights are central to the way healthcare services are delivered to our patients and how we support our staff. We recognise the right of all our patients, visitors, and employees to be treated fairly and considerably irrespective of age, gender, marital status, religious belief, ethnic background, nationality, sexual orientation, disability, and social status.

We are committed to promoting equality and diversity in everything we do; we strive for the Trust to be a safe place where people can be their true and authentic selves.

We make every effort to ensure staff and patients are treated in an inclusive way by encouraging everyone to role model the values, create equal opportunities, treat people fairly and develop good working relationships at the ROH. The Trust works to ensure that patients, staff and other stakeholders have a voice to put forward suggestions, concerns and ideas. There is a dedicated team to support and co-ordinate the Inclusion Strategy, agenda and action plan across the Trust. There is also a Patient Liaison team to support any patient who has any concerns.

The Trust has a zero-tolerance approach to all forms of harassment including sexual and racial harassment and will take all complaints of this nature extremely seriously.

The Trust continues to meet the requirements under the **Public Sector Equality Duty** of the Equality Act 2010. One of these requirements is for the Trust to share the content of this report with the public through our ROH website.

This enables us to:
- deliver on the NHS Outcomes Framework and the NHS Constitution
- meet the Care Quality Commission's "Essential Standards of Quality and Safety"

Summary

The Royal Orthopaedic Hospital NHS Foundation Trust is one of the largest specialist orthopaedic units in Europe, with approximately 1200 permanent employees. We offer planned orthopaedic surgery to people locally, nationally, and internationally. The Trust has a 200-year history and a strong culture of tradition and loyalty. The aim at the Royal Orthopaedic Hospital (ROH) is to offer an inclusive and fair patient service and employment which meet the diverse and personal needs of our patients, staff, and visitors.

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This report reviews relevant diversity and equality data for patients and staff highlighting key areas of interest. Additional information in the report includes staff survey data, Workforce Disability Equality Standard (WDES) and the Workforce Race Equality Standard (WRES).

The Trust works to the EDS 2 system as recommended by commissioners to ensure all areas of the Trust are evaluated for effectiveness of an equality and diversity. Consultation with key stakeholders continues to enable the Inclusion actions to be reviewed and updated on an ongoing basis providing assurance the Board and stakeholders. All the actions are aligned to the Trust Inclusion Strategy which can be accessed from the Trust website.

Our Inclusion Vision and Values

Our values
Our values are more than words, they define how we treat one another and how we deliver care. Positive values are the bedrock of our culture. Our values inform how we understand and practice inclusion at ROH.

- *Respect and listen to everyone*
- *Have compassion for all*
- *Work together and deliver excellence*
- *Have pride in and contribute fully to patient care*
- *Be open, honest and challenge ourselves to deliver the best*
- *Learn, innovate, and improve to continually develop orthopaedic care*

Refining the vision – in line with progress made building on feedback from members of the ROH team, we have the vision. The following quotes are from our colleagues who we asked to explore what 'Inclusion' means to them.

A new vision
Building on our values and the feedback from our team, we have created a new vision for inclusion.

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To achieve our vision, all staff working in the NHS today need an awareness of inclusion issues and who is afforded protection.

Our refreshed vision for 2021

Our vision is to nurture a connected culture of belonging where we bring our authentic selves to work and visitors experience an inclusive environment, ready to meet their needs.

Equality Objectives

We will achieve our ambition to be an inclusive organisation (in line with the NHS People Plan) through a clear set of strategic objectives and an action plan which will work across all areas of the trust.

Overall, the strategic objectives are to create a truly inclusive environment at the ROH which will continue to improve the patient and colleague experience through:

• **Objective 1:** Tackling and removing all forms of discrimination in order to promote equality for all

• **Objective 2:** Creating an inclusive and healthy ROH culture through Trust values

• **Objective 3:** Giving colleagues and patients a voice to speak up and ask for access to Opportunities

• **Objective 4:** Ensuring our leaders, managers and colleagues role model in a compassionate and inclusive way

• **Objective 5**: Being recognised as a Top Inclusive Employer externally through best practice approach to demonstrate continuous improvement

• **Objective 6:** Ensure the Equality and Diversity work plan delivers on the required Objectives

Each objective has been translated in one of the six high impact areas listed below

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High impact areas

1: Proactive ambassadors at all levels of the Trust

- Embed effective mentoring approach
- Embed NHS Partners Programme

2: Accessible through the ROH culture lens

- Inclusive approach to attracting and retaining staff
- Embed a respect and civility approach

3: Building staff/patient voice through feedback and networks

- Development of staff networks including participation and governance
- Redevelop the Freedom to Speak Up Guardian (FTSU) approach
- Embed best practice through external partners

4: Education and awareness for all around cross culture

- Implement programmes for all staff levels including senior leaders
- Embed a culture of inclusive thinking
- Strengthen the importance of our staff network voice
- A well communicated Inclusion calendar

5: Best practice through accreditation

- Ensure continued focus on accreditation through external best practice providers
- Develop evaluation tool for the Inclusion strategy
- Establishment of links with regional and national NHS leagues to share best practice

6: Using data and metrics research to promote change

- Embed an approach for staff and patients to access key inclusion data and information
- Developing further NHS compliance data
- Analysis of feedback from patients and staff interventions is well defined
- Embedded approach to Equality Impact Assessments across all departments

Our progress in 2021 / 2022

- Successful listening sessions with the MMEG group
- Joined Stonewall organisation
- Phase 1 recruitment project complete
- Completed NHS partner's programme
- AccessAble project completed for patients and visitors
- Second cohort EPIC workshop launched for colleagues across different disciplines
- Launched "Seeing Beyond the Stigma" Exhibition
- Celebrated 3rd anniversary of the Equality & Diversity Network
- Ranked number 15 in the Inclusive Top 50 UK Employers in the UK 2021
- Collaborated on first regional virtual LGBTQ+ conference
- Awarded Level 3 Disability Confident Employer accreditation
- Awarded Bronze accreditation from the Thrive at Work Workplace Wellbeing programme
- Refined inclusion action plan
- Research project in collaboration with Canterbury Christ Church University (to be started)
- Organisation of MMEG mentoring programme

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- Ranked in top ten best performing NHS Trusts for work on the Workforce Race Equality Standard (WRES) Indicator 5
- During the pandemic, the Trust has also focussed on supporting different diverse groups in the Trust with specific interventions including:
    - Ethnic minorities
    - Shielding staff
    - Menopause
    - Initial Long Covid support
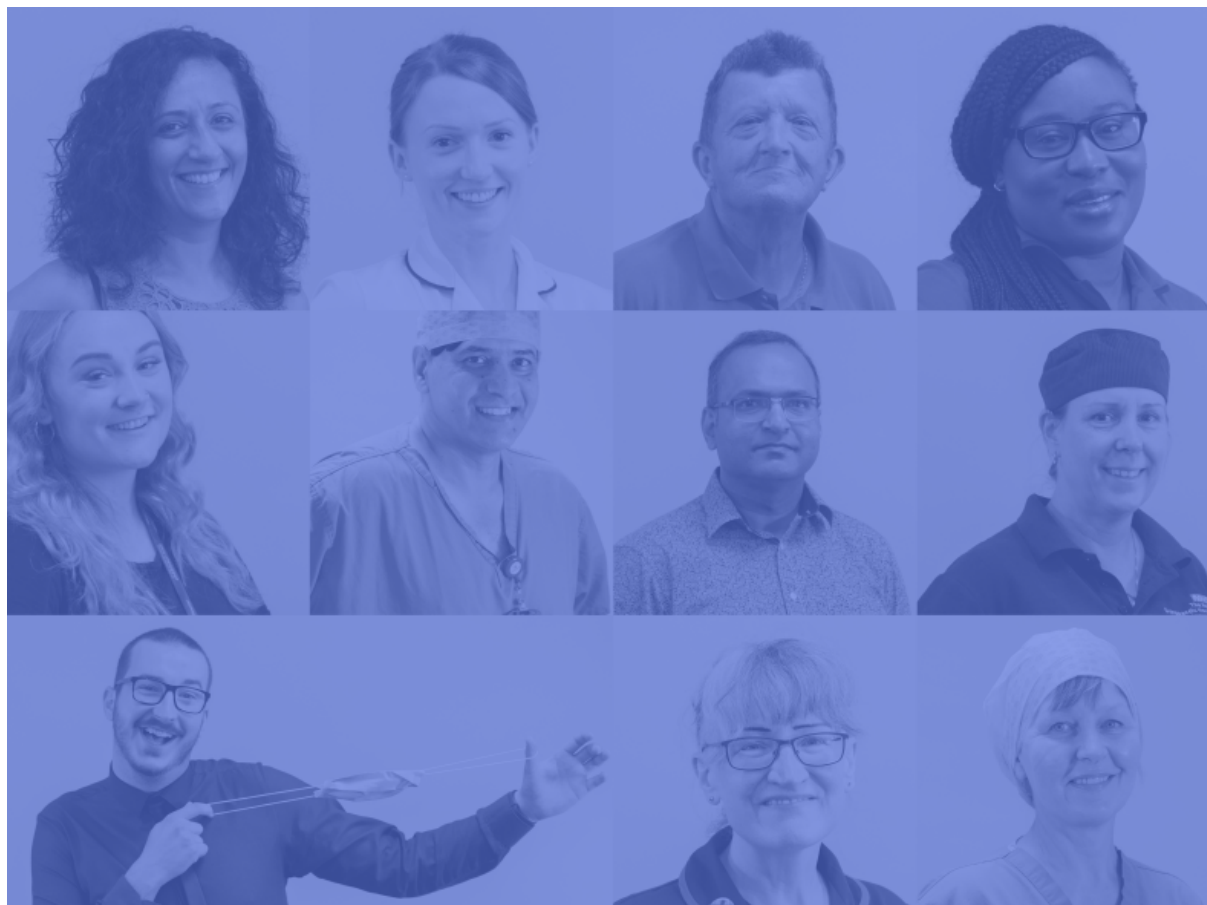
The General Equality Duty

The Trust is required to work to Section 149(1) of the Equality Act 2010 as part of the various requirements on NHS organisations when exercising their functions. The general duty requires NHS organisations to have due regard to:

- Eliminate discrimination, harassment and victimisation and other conduct prohibited under the Act
- Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it
- Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

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The EDS 2 Delivery System 2

The Equality Delivery System 2 (EDS 2) is designed to support NHS commissioners and providers to deliver better outcomes for patients and communities and better working environments for staff, which are personal, fair and diverse. A full explanation of EDS can be found at the weblink below or contact Clare Mair – OD and Inclusion for more information:
https://www.england.nhs.uk/about/gov/equality-hub/eds/

EDS 2 Framework

The EDS 2 framework which is represented by an action plan, is split into 18 areas under the four following outcomes:

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

Delivery of the action plan is achieved by colleagues working across the Trust. An Inclusive culture needs to be everyone's business and there is strong support and guidance from the Trust Board and stakeholders.

Implementation of EDS 2 at ROH

This is the fifth year that ROH have developed an annual equality and diversity plan against the EDS 2 criteria. The actions in the EDS2 framework are developed taking into account staff and patient data and feedback

This document is continually reviewed based on feedback and evidence, which has been reviewed both internally and externally (limited due to the pandemic), on particular aspects of equality and diversity around the nine protected groups. The delivery of the EDS2 agenda plays a large part in the Trust's work in embedding a truly inclusive culture at ROH for staff and visitors

Monitoring and reviewing

Monitoring and reviewing of the ROH Inclusion Action plan is a continuous process achieved in conjunction with the EDS 2 action plan in the following ways:

- Sign off and bi annual update at the People Committee
- Sign off and bi annual update at the Staff Experience and OD Committee meeting
- Annual update at operational meetings
- Updates to Executive Directors and Trust Board as requested
- Progress updates to Associate Director of Workforce and OD
- Discussion at staff networks

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Inclusion roadmap

2018

2019

2020

2021

2022

2023

WORK WILL CONTINUE, IN PARTICULAR AROUND
THE 6 IMPACT AREAS IDENTIFIED IN OUR STRATEGY

Date	Event
JAN 2018	ENGAGEMENT WITH PATIENT CARER FORUM STARTED
JULY 2018	PARTNERSHIP SUPPORT FROM BRAP
JULY 2018	SCHWARTZ ROUNDS STARTED
AUG 2018	FIRST COLLEAGUES ACCEPTED ONTO STEPPING AHEAD
NOV 2018	ACCESSIBLE INFORMATION STANDARD COMMITTEE STARTED
NOV 2018	E&D NETWORK WAS SET UP
NOV 2018	MHFA TRAINING STARTED
JAN 2019	EQUALITY AND DIVERSITY AWARENESS EVENTS LAUNCHED
MAR 2019	LGBTQ+ FLAG RAISED
MAR 2019	LGBTQ+ AWARENESS WEEK
APR 2019	E&D BRANDING LAUNCHED BY E&D GROUP
APR 2019	INVOLVED WITH BIRMINGHAM PRIDE
APR 2019	SPEAK-UP MOBILE APP LAUNCHED
APR 2019	WDES REPORTING STARTED
APR 2019	DISABILITY FORUM STARTED
APR 2019	MENOPAUSE AWARENESS
JAN 2020	E&D LEAD APPOINTED TO BOARD
APR 2020	BAME LISTENING SESSION
JUNE 2020	BAME CONVERSATIONS STARTED
JUL 2020	LGBTQ+ 'BE MYSELF' GROUP ESTABLISHED
JUL 2020	1ST MMEG MEETING
AUG 2020	DISABILITY CONFIDENT ACCREDITATION
AUG 2020	AUGUST 2020 FIRST BE MYSELF LISTENING SESSION
OCT 2020	OCTOBER 2020 PILOT ANTI-RACIST WORK-SHOP
DEC 2020	DECEMBER 2020 WDES SUCCESSFUL FUNDING BID
DEC 2020	RANKED 34TH IN INCLUSIVE TOP 50 UK EMPLOYERS
FEB 2021	FIRST MENOPAUSE SUPPORT GROUP
MAR 2021	REGIONAL LGBTQ + CONFERENCE
APR 2021	MMEG CHAIR APPOINTED
APR 2021	VIRTUAL HEALTH & WELLBEING WEEK
APR 2021	ACCESS ABLE LAUNCH
JULY 2021	SEEING BEYOND THE STIGMA EXHIBITION
AUG 2021	FIRST COHORT OF THE EPIC PROGRAMME
SEPT 2021	E&D THREE YEAR CELEBRATION
SEPT 2021	TRUST REPRESENTED AT PRIDE
DEC 2021	15TH RANKING FOR INCLUSIVE COMPANIES TOP 50
JAN 2022	DISABILITY NETWORK CHAIR APPOINTED
JUN 2022	NHS 10000 BLACK INTERN PROGRAMME LAUNCHED AT ROH
JUN 2022	MMEG MENTORING PROGRAMME LAUNCHED
JUL 2022	FIRST WOMEN'S NETWORK EVENT

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In order to deliver the Inclusion strategy, it is important that the Trust supports and promotes the involvement of ambassador groups at different levels. These groups include involvement from staff, senior leaders, unions, staff networks, Foundation Trust members and patients. More information about these networks is shared below:

Staff involvement

All staff are given the opportunity to learn more about the importance of equality, diversity, and inclusion. This is done through mandatory training, learning opportunities and regular feedback sessions to capture staff thoughts. Sessions are run across the Trust and also in specific departments. Future interventions will continue to balance the advantages of using online medium and classroom formats.

Senior Leaders

Our Executive Directors and Non-Executive Directors (NEDs) are very involved in the Inclusion work undertaken at the Trust with Richard Phillips being appointed as E&D Lead in January 2020. Through Trust Board meeting and sub board committees, members are given updates on progress and future plans. In addition, Trust Board members from the subcommittee of Staff Experience and Organisational Development (SE&OD) are active participants in interventions including E&D sessions, listening sessions and network meetings. In addition, members of our SE&OD Board regularly meet with departments during 'staff walk-abouts'. More recently these have been virtual.

ROH Networks – Staff Voice

At the ROH, we are hoping in the future to have full engagement from our colleagues on a number of initiatives, programmes and networks that help to promote the importance equality and diversity for staff, patients and visitors. The Trust ensures that this Inclusion approach supports our work in delivering continuous improvement and working in partnership with local and national stakeholders.

The Trust has a growing number of networks run by colleagues to promote the voice of our diverse staff groups. The Trust recognises the strength of supporting our network groups. Equality and Diversity was the first network formed in November 2018, with the remit of raising awareness and promoting Inclusion across the Trust. Following on from the success of the E&D Network, other diverse networks have formed, as shown below. These networks have their own identity and focus and are aligned to the overall Inclusion plan. The ambition is for the diversity of staff voices to be increased over the coming years as either standalone networks, or as part of the Equality and Diversity Network. The following networks have clear Terms of Reference with the overarching aims to provide support, awareness, education, and positive action. All the networks have sponsors from our Trust Board. We are looking to expand our networks in the future, including a network for those who identify as female.

Equality & Diversity Network (E&D Network)

The Equality & Diversity Network was set up in 2018, to create the opportunity for employees to discuss matters surrounding diversity, inclusion and to raise awareness within the Trust. The network has gone on to hold numerous awareness sessions surrounding diverse topics and have drawn together a wide range of information about all aspects of equality, diversity, inclusion, and human rights.
Chair: Claudette Jones
Exec sponsor: Simon Grainger Lloyd

Multi Minority Ethnic Group (MMEG)

The Multi Minority Ethnic Group (MMEG) was set up in summer 2020 following a series of listening sessions with colleagues at the Trust during the rise of the Black Lives Matter movement. The group provides a space for colleagues to talk about issues important to staff from ethnic minority backgrounds with an aim of creating positive change. Any member of ROH staff, including allies, are welcome to attend meetings and get involved. Activity for the group during 21/2022 included Trust wide celebratory and educational activity for Black History Month as well commencing work in setting up the MMEG Mentoring Programme which is due to launch during 22/2023. The group was also instrumental in supporting the facilitation of a CQC focus group for colleagues from ethnic minority backgrounds – agreeing actions following the session and incorporating them into the Trust wide inclusion agenda and action plan.

Chair: Falon Paris-Caines
Exec sponsor: Marie Peplow

Disability Network

The Disability Network was set up in April 2019. Their purpose is to promote and celebrate the diversity of our Disabled staff, patients, and allies. A key element of the network is to engage and educate staff around the different disabilities that our colleagues live with, Including those who may have invisible disabilities, such as mental health conditions, or long-term conditions following on from an illness.

Chair: Alex Gilder
Exec Sponsor: Phil Begg

LGBTQ+ Network (BeMyself)

BeMyself, The Trust's LGBTQIA+ Network, is an inclusive and open group of colleagues. The group was set up in 2020 to provide a safe space for members of staff to come together and celebrate diversity and inclusion, and to discuss any concerns they may have surrounding the representation of LGBTQIA+ staff in the Trust. They welcome allies and celebrate the diversity of the group. Listening sessions are set up by a member of the group, to provide a safe environment for staff to discuss their issues and concerns, or if they are just looking for other staff members to talk to.

Representative: Group Led
Exec sponsor: Matt Revell

Menopause Support Network

In July 2020, a Menopause Support Group was set up; the group offers peer to peer support and has been a great opportunity for colleagues to be open and discuss how they are feeling and also share any support. We are continuing to offer guidance, signposting and support for all our colleagues around the menopause.

Chair: Group Led
Exec sponsor: Jo Williams

Key Projects

Schwartz Rounds

Schwartz Rounds are group reflective practice forums giving staff from all disciplines an opportunity to reflect on the emotional and social aspects of working in healthcare.

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Enabling a Productive & Inclusive Culture (EPIC) Programme

The Enabling a Productive & Inclusive Culture (EPIC) Leadership Programmes approach is to drive enabling and establishing improved inclusive culture within the Royal Orthopaedic Hospital Trust (ROH).

The EPIC programme: will provide participants with practical resources to apply in their working environments which will enable an inclusive culture to flourish. It is open to everyone. It is inclusive at its core. The EPIC programme influences us to become inclusive leaders through exploration of the following: exploring inclusive thinking and how it improves performance and culture, inclusive conversations, inclusive talent, and inclusive improvement.

Learners will gain a deeper understanding of themselves, their impact on others, tools to engage individuals and teams through a coaching approach, how to give effective feedback, how to identify and nurture individuals, tools to develop succession plans and techniques to support improvement and change plus much more.

The programme is made up of 6 modules that you will attend over a period of 6 months focussing on key elements each day to become an inclusive leader within the workplace.

These modules are:

- **Values Discovery** (*Gain a deeper understanding of your values, the impact they have on your decision, making relationships and goal achievement*)

- **Inclusion & Unconscious Bias** (*Identifying that the concept of inclusion is not a tick box exercise and requires a different mind-set, thinking skills and new perspectives*)

- **Inclusive Conversations** (*Identifying practical coaching practices, what coaching is and when a coaching style is appropriate. Additionally, looking at foundation skills such as Active Listening, Building Rapport & Questioning*)

- **Inclusive Talent** (*Understand what is talent and talent management*)

- **Inclusive Improvement** (*Underpinning knowledge, resources and support to make you think, plan and do things differently. Additionally, look at the fundamentals required to enable and support innovation*)

- **Inclusive Leadership, Going Beyond the Conversation & Next Steps** (*Focussing on inclusive leadership behaviours, including a Synopsis Quiz and your next steps for Organisational Impact*)

All learners are required to attend all the modules and there will be opportunities for buddying up with peers on your programme, become a member of our proactive Inclusion network of colleagues

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and be part of influencing the future design of new ROH services and models for an improved inclusive culture.

Seeing Beyond the Stigma Exhibition

A powerful and remarkable exhibition that shares the stories of 8 members of staff and their experience of disability and long-term conditions, both visible and unseen. Eight people from the Royal Orthopaedic Hospital took part in a project to share their experiences to help others see beyond the stigma. https://www.roh.nhs.uk/beyondstigma

Key Meetings

Trust Wellbeing Implementation Group (TWIG)
People & Organisational Development Group
Staff Experience & Organisational Development Committee
Network meetings

National measurements

As a Trust we will continue to work to the regulatory NHS measures required. Each of these is highlighted below with a brief overview. We will also ensure that we look beyond the data and national benchmarking to understand the key actions that are required to have the best impact for Inclusion at the Trust.
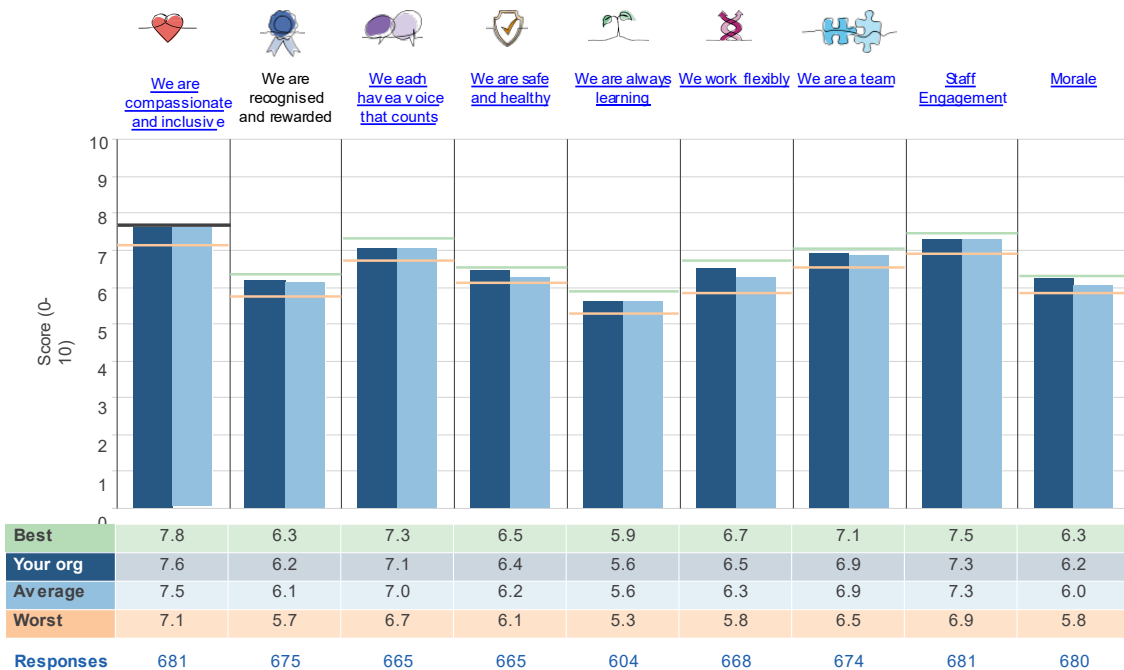
NHS Staff survey results

People Pulse Survey

The People Pulse is a national online pulse survey, developed for all provider and commissioner organisations, to support local listening and engagement activities. Results provide a regular national, regional and local view of employee experience and wellbeing. The first people pulse was run in January 2022.

National NHS staff survey

All Trusts are required to undertake the staff survey which is completed during October and November on an annual basis. Key information can highlight issues and opportunities not just in different departments or directorates but also in diverse groups. There is an annual organisational action plan, as well as directorate plans. The staff survey information is used across the Trust. Over the past five years the Trust has improved the completion rate to 57% in the last survey. This means the data is valid and gives good representation across the Trust. The table below shows the results for the ROH compared to twelve other Trusts in the Specialist Acute Trust group. In all areas the ROH results are towards the higher end of the results in this Group. The ROH was the highest score in all areas when compared against Trusts in the BSol region. This is the first year that results have been presented across the People Promise which means it is difficult to make comparisons from previous years.

	We are compassionate and inclusive	We are recognised and rewarded	We each have a voice that counts	We are safe and healthy	We are always learning	We work flexibly	We are a team	Staff Engagement	Morale
Best	7.8	6.3	7.3	6.5	5.9	6.7	7.1	7.5	6.3
Your org	7.6	6.2	7.1	6.4	5.6	6.5	6.9	7.3	6.2
Average	7.5	6.1	7.0	6.2	5.6	6.3	6.9	7.3	6.0
Worst	7.1	5.7	6.7	6.1	5.3	5.8	6.5	6.9	5.8
Responses	681	675	665	665	604	668	674	681	680

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Workforce Race Equality Standards (WRES)

The Workforce Race Equality Standard (WRES) is to improve the experience of ethnic minority staff in the workplace. This includes employment, promotion and training opportunities. It also applies to people from ethnic minorities whose ambition is to work in the NHS. See separate report in Appendix I

Workforce Disability Equality Standards (WDES)

The NHS Workforce Disability Equality Standard (WDES) came into force on 1 April 2019. See separate report in Appendix I

It is a set of specific measures (metrics) that will enable NHS organisations to compare the experiences of disabled and non-disabled staff. This information is used by the Trust to develop a local action plan and enable them to demonstrate progress against the indicators of disability equality.

Equality data for staff and patients

This information is included annually in this Equality and Diversity annual report which is published on the internet. Please see below

Access Information Standard (AIS)

Work continues to further secure the Trust's compliance with the Accessible Information Standard (AIS). The Trust has an up-to-date AIS policy and information in relation to the standard is included in the Trust mandatory training. The Trust is now using electronic correspondence for patients in

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relation to both appointments and clinical letters. This provides a more flexible platform for patients to access their letters using read aloud and translation software to help ensure this information is available in an accessible format. Communication boxes are available on all wards and departments as well as hearing loops both fixed and mobile. Furthermore, work has been completed through AccessAble to carry out a complete survey of the ROH site and provide patients, visitors and staff with internet-based access guides that help all visitors to the ROH site plan their journey, regardless accessibility issues they may or may not have.

Gender Pay Gap Reporting

Gender pay reporting is different to equal pay which deals with the right for men and women to be paid the same when doing the same, or equivalent, work. The gender pay gap shows the difference in average pay of all men and average pay of all women within one organisation. It is therefore possible to have genuine equality of pay but still have a pay gap between genders. As a trust ROH, uses the Agenda for Change job evaluation framework to benchmark appropriate pay bandings to our roles, this in turn provides a process for paying staff equally for the same or equivalent work. Progression through pay steps under the Agenda for Change framework is based on time in post and satisfactory performance irrespective of gender. Please see separate report

Outstanding through External partners

The Trust works with a number of external partner organisations which enables ROH to be assessed and accredited against independent standards. It also gives the Trust access to national and international support, advice, networking, and resources.

Recently the Trust has been awarded Level 3 Disability Confident Leader accreditation, a positive increase from our Level 2 accreditation. This means ROH is recognised as being actively committed to attracting, recruiting, and retaining disabled people. There is a paragraph on the NHS Jobs website for our Trust which welcomes applicants with Disabilities "The ROH is an equal opportunities employer. We employ people of difference and are committed to growing an inclusive culture, where difference is celebrated, and people feel able to bring their whole and authentic self to work. We are a Disability Confident Leader and offer a range of inclusive, family friendly and flexible working arrangements and policies, to support our people in the workplace. The Trust is committed to the 'Disability Confident Interview Scheme' and will offer an interview to disabled applicants who meet the minimum criteria for a vacancy and consider them on their abilities".

Recently we have been awarded a Level 2 Disability Confident Employer. This means are actively committed to attracting and recruiting disabled people to help fill our opportunities.

We have a paragraph on the NHS Jobs website for out Trust which welcomes applicants with Disabilities "Our organisation is disability confident; we are committed to offering equal opportunities for all. We welcome applications from disabled people and value their life experience"

The Inclusive Top 50 UK Employers is a definitive list of UK based organisations that promote inclusion across all protected characteristics, throughout each level of employment within their organisation. The Trust submits an application annually to be assessed for the top 50 ranking.

The Chartered Institute of Personnel and Development set professional standards for HR and people development

The HSJ Awards continue to be the most esteemed accolade of healthcare service excellence in the UK. The Awards do not only adhere values of sharing best practice, improving patient outcomes, and innovating drivers of better service, but most importantly provide a well-deserved thanks to the sector.

Stonewall empower LGBTQ+ People to be their authentic selves, enabling them to realise and achieve their full potential, and empower LGBTQ+ People and allies to create positive change.

The Point of Care Foundation helps to deliver their vision by providing evidence and resources to support health and care staff in the valuable work of caring for patients.

BRAP (Birmingham Race Action Partnership) is a charity transforming the way we think and do equality.

Mental Health First Aiders have the skills they need to support their own and others' wellbeing.

Schwartz Rounds provide a structured forum where all staff, clinical and non-clinical come together regularly to discuss emotional and social aspects of working in healthcare.

Thrive at Work Thrive at Work is a workplace commitment from West Midlands Combined Authority with criteria and guidelines on creating a workplace that promotes employee health and wellbeing. There are four accreditation levels for Thrive at Work, Foundation, Bronze, Silver and Gold, each have commitment themes. The themes are Enablers of Health, Mental Health, Musculoskeletal Health, Lifestyles and External Risks to Health which we use alongside ROH's five ways to wellbeing Connect, Be Active, Mindfulness, Give and Keep Learning. Using this framework, promoting and reinforcing wellbeing will help with a happier, more productive and healthier workforce.

Union Partnerships

The Royal College of Nursing represent nurses, midwives, student nurses, and health care assistants, assistant practitioners, nursing degree apprentices and trainee nursing associates across the UK.

UNISON represents and acts for members working in a range of public sector services and utilities.

The BMA is the trade union and professional body for doctors in UK.

Other Key partners

- NHSE/I
- Participants on the NHS Inclusion Partners Programme
- Northfield Community Partnership
- EPIC – Culture and Inclusion programme
- National, STP and Regional networks

Links to other ROH Strategies
The Inclusion strategy does not sit independently and is linked most importantly to the following strategies:
• The ROH five-year strategy for excellence
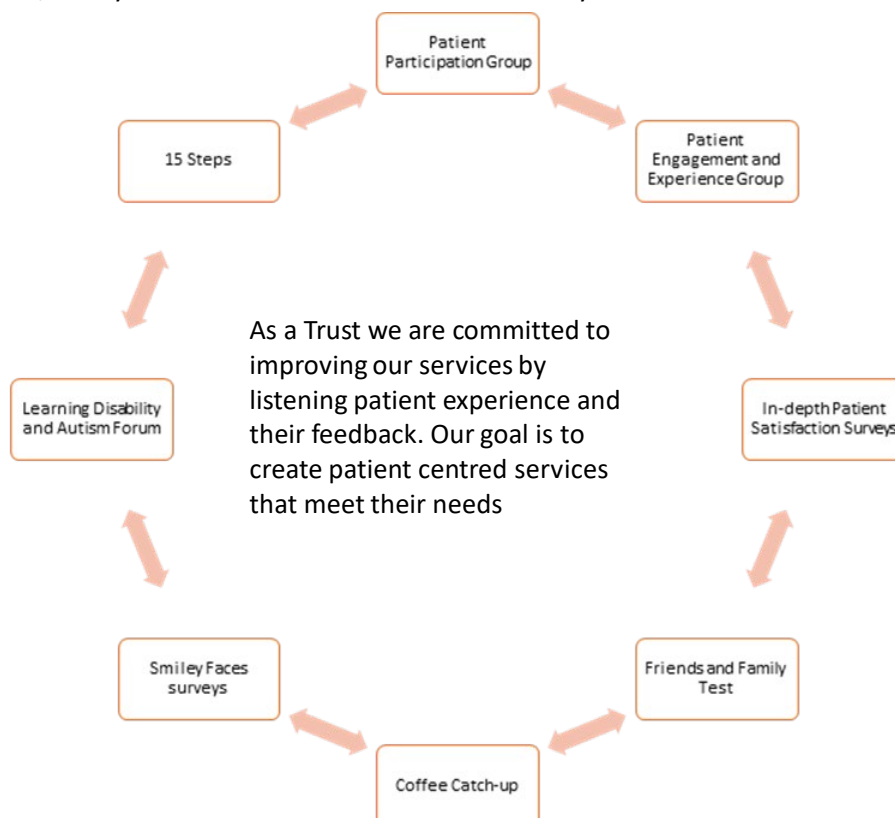• The ROH Clinical Strategy
• The Education and Training strategy

• The Patient Engagement strategy

Patient engagement
It is important to provide a forum for our patients to be heard. This enables us to track how we are performing as a Trust and to ensure we continue to build patient pathways that are inclusive for everyone. There are two key elements that enable us to focus on our patients' views:

Patient Advice and Liaison Service (PALS) ensure our work aligns to our Patient Engagement strategy that is managed by the PALS departments and supported across the Trust.

The Trust have established Following Groups, Leaflets, surveys and walkabouts for the patients, their carers, family members and members of community.

As a Trust we are committed to improving our services by listening patient experience and their feedback. Our goal is to create patient centred services that meet their needs

The Trust have translated PALS leaflets and posters into 5 common languages where it gives an opportunity to the patients to give us their feedback, comments, complaints or rase concerns on their language and the Trust will replay on their preferred language. This service is offered to all of our patients no matter what their first language is.
The Trust have also rolled out Smiley Faces feedback with emoji faces for our patients to leave us feedback on the care and their experience. Work will start in 2022 to review the multi faith areas that are available to both patients and colleagues.

Recruitment and Selection
The Trust implements Value Based Recruitment (VBR) with standard documentation and interview panels consisting of at least one VBR trained interview panellist.   Training courses will continue to be provided once 'trac' is introduced to further upskill interviewers to recruit fairly as well as recognising the nine protected characteristics.

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Following feedback from the staff survey around opportunities as well as equality data for recruitment, the Trust will concentrate on creating a stronger employer brand, improve attraction from all sectors of society to ensure the workforce accurately reflects the community the Trust serves, and implementing best practice for a fair and equitable recruitment and selection approach.

Bullying and Harassment

There is union representation at the Trust for staff and a good working relationship between HR and Staff Side.

The Freedom to Speak up (FTSU) Guardian also works closely with the contact officer network with cases that involve staff issues rather than patient concerns. Freedom to Speak up champions will be recruited in 2022.

Inclusion training continues to be delivered at mandatory session and material has been updated in 2021 to reflect current information, survey results and national trends. Inclusion awareness is timetabled on all internal Leadership programmes run at the Trust. Staff are also made aware of funded regional inclusion training workshops open to all staff members.

Policy updates

Policies linked to Equality and Diversity are regularly reviewed and updated. With the forthcoming introduction of the "trac" candidate management system, the Recruitment and Selection Policy will be updated to reflect a different way of working in future.

The Staff side representative review and approve all changes to policies. The representative is also kept fully informed by the HR Team on any issues or changes that may impact staff members.

The work of the Learning Disability (LD) nurse is well embedded. The Learning Disability Strategy has launched, and a suite of training sessions are available on the subjects of Learning Disabilities, Dementia and Mental Health. The LD nurse is available to offer support and advice.

Impact on Equality

All individuals submitting policies must complete and include an Equality Impact Assessment. Completion is monitored by the Associate Director of Governance & Company Secretary.

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Workforce and Patient Information

The following sections include data information for staff and patients. This information is collected and reported by the ROH ESR and Informatics Teams on an annual basis. There is a requirement for the data to be published on the ROH website.

The data is reviewed and used in a number of ways including:
- Discussion at the Staff Experience and OD (SE&OD) Trust Board sub committees
- Discussions at Operational meetings
- Review and discussion at staff network meetings
- Review by Patient Liaison team to support the patient experience
- Used to inform on the key priority areas as part of the ROH Inclusion plan
- Presentations to external organisations on the ROH Inclusion
- Analysis of data as part of the NHS WRES and WDES standards

Workforce information

In this section, staff data is presented for the six of the protected characteristics: Ethnicity, Religion Belief, Gender, Disability, Sexual Orientation and Marital Status. There is no detailed information recorded for Transgender staff members, Marriage and Civil Partnership, Pregnancy and Maternity. The data has been collated from the NHS workforce ESR database between January 2020 to December 2021.
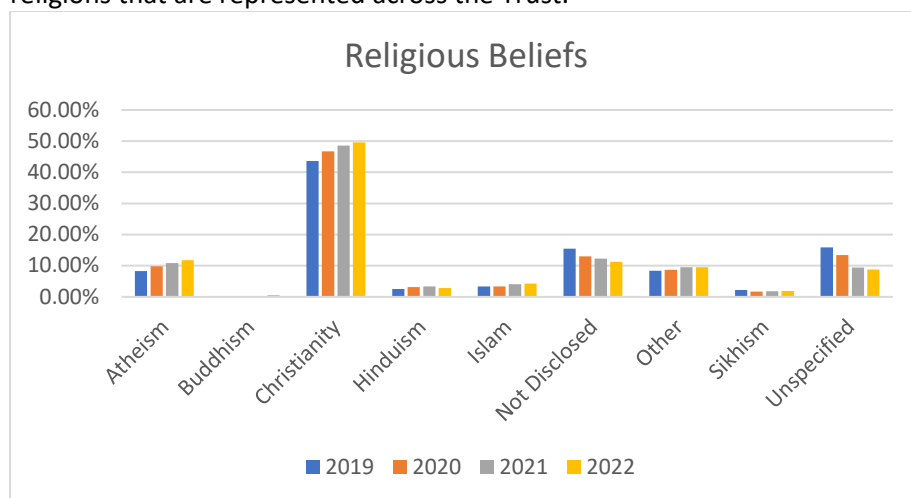
Ethnicity
The data has not changed significantly over the last twelve months however work continues through the Inclusion plan to ensure that recruitment and career opportunities are a key focus for our MMEG colleagues.
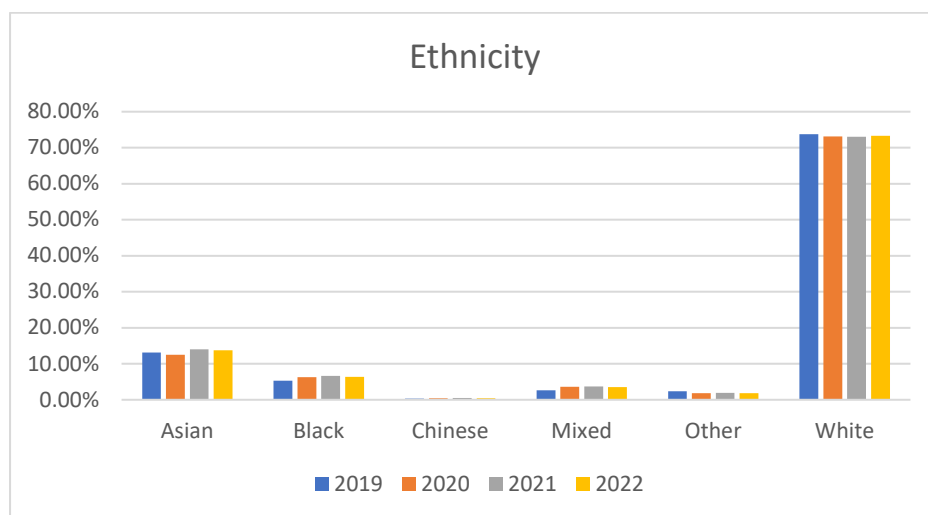
Comparing patient ethnicity data there is a difference with the percentage for white patients attending outpatients at 60% compared to 73% of staff from a white background   There is also a high figure for 'non disclosed' amongst patient data which will be discussed with Patient Liaison team.
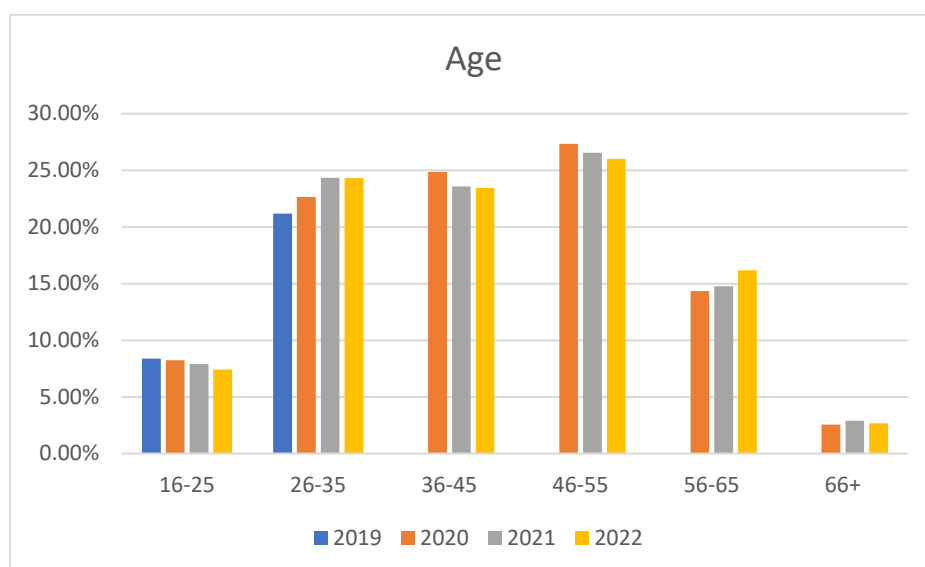
Religious Belief

Through the different staff networks, the Trust has continued to support and highlight the different religious celebrations and festivals that are important to colleagues. This includes education on how staff will need to be supported during working hours for religious festivals. The data shows the key religions that are represented across the Trust.

Religious Beliefs

Categories: Atheism, Buddhism, Christianity, Hinduism, Islam, Not Disclosed, Other, Sikhism, Unspecified (2019, 2020, 2021, 2022)

Age

Again, there are no significant changes to this data however the information has helped to focus on key initiatives including supporting a menopause programme and recognising Long Service.

Age

Categories: 16-25, 26-35, 36-45, 46-55, 56-65, 66+ (2019, 2020, 2021, 2022)

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Gender

The second table gives key information on gender across the different levels in the Trust. Work continues to ensure there is equal access to job opportunities and promotion for all colleagues with key focus on the future workforce.

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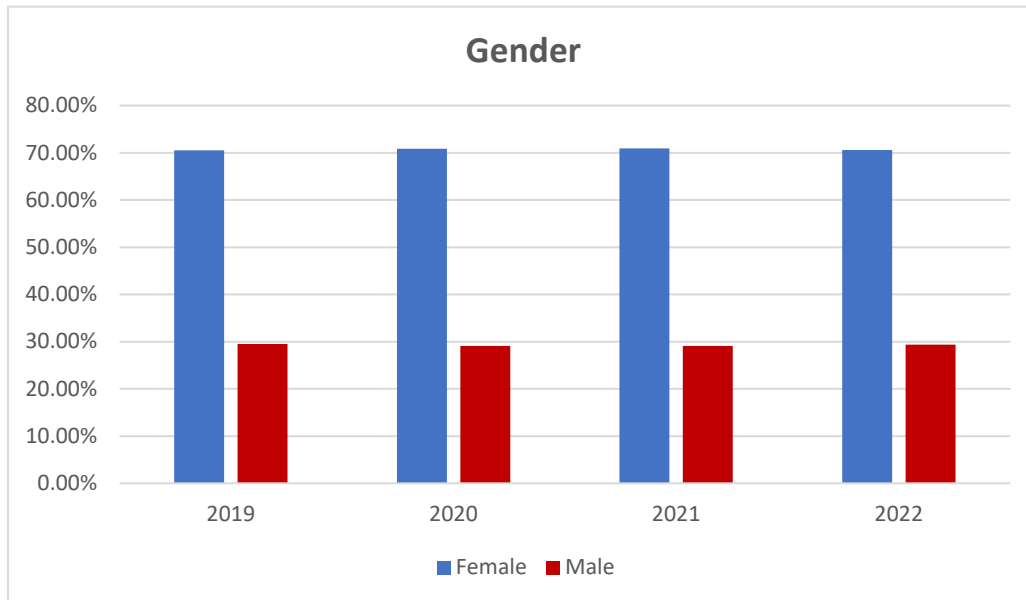
Disability

This data highlights that more work still needs to be done to ensure staff are encouraged to confirm their status in a safe way. A project is underway to improve declaration rates that is supported by the Disability network, other staff networks, the OD and Inclusion team and ESR Team.
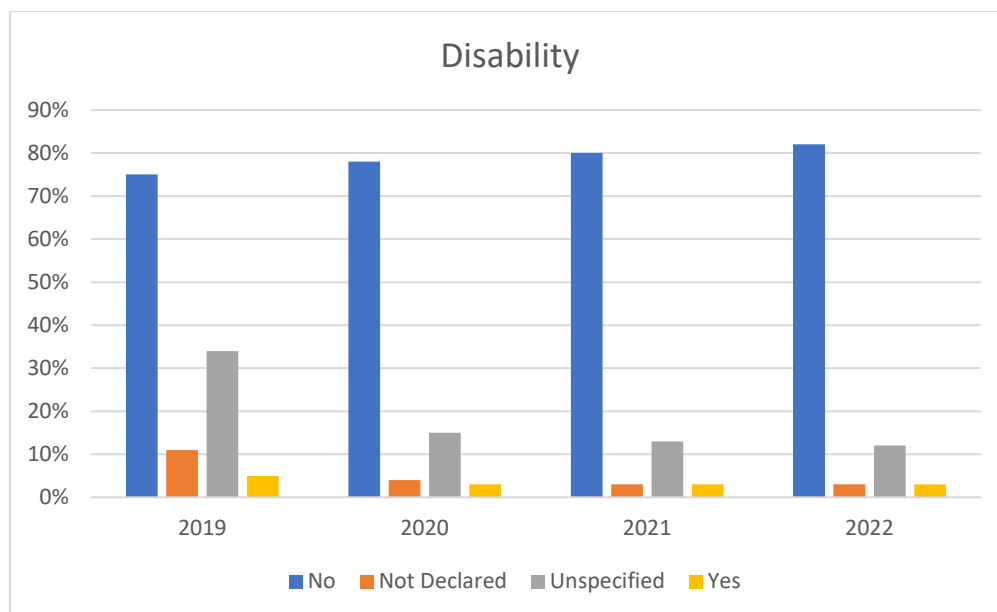

Sexual Orientation

Again, this data highlights that more work needs to take place to ensure staff are comfortable to declare sexual orientation. The number of not 'disclosed' and 'unspecified' has declined which is positive and the BeMyself LGBTQ+ network will continue to support colleagues to feel safe.

26
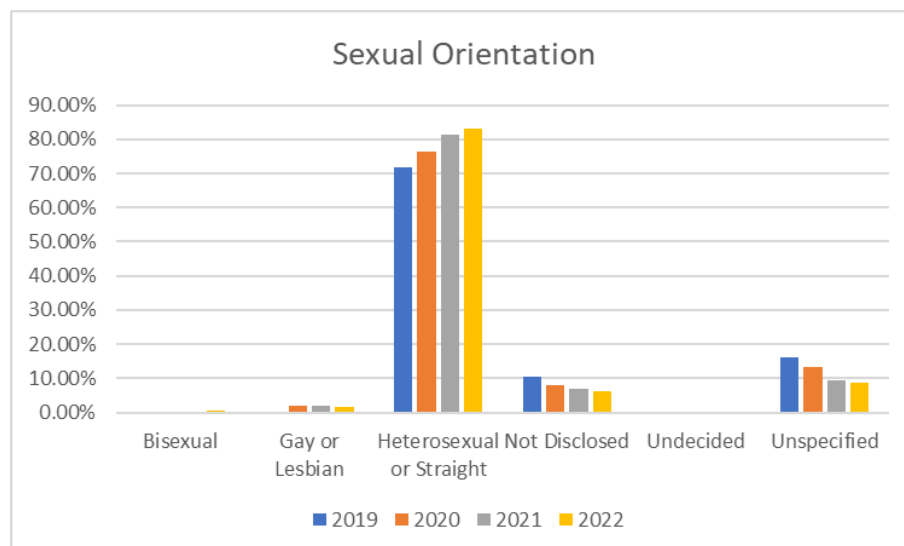
Marital Status

The data again has stayed consistent from previous years.
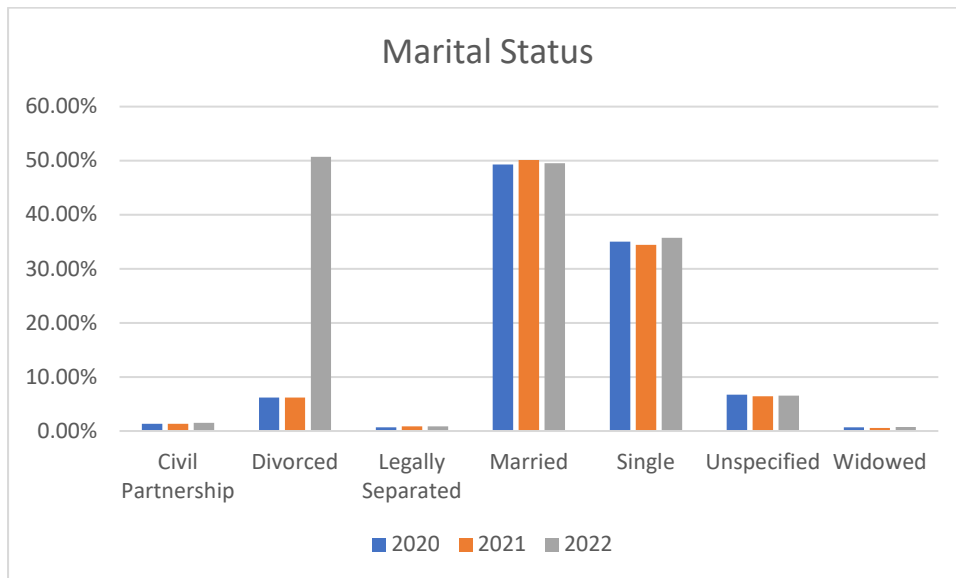
Patient data

The data shown below for patients is taken from January 2020 to December 2021.

Ethnicity

There is a difference between inpatient and outpatient data. For 2022 data there was 75% inpatient from a white background compared to 60% for outpatients. It should also be noted that both inpatients and outpatients, 45% of patients did not declare ethnicity in 2022.

Ethnicity
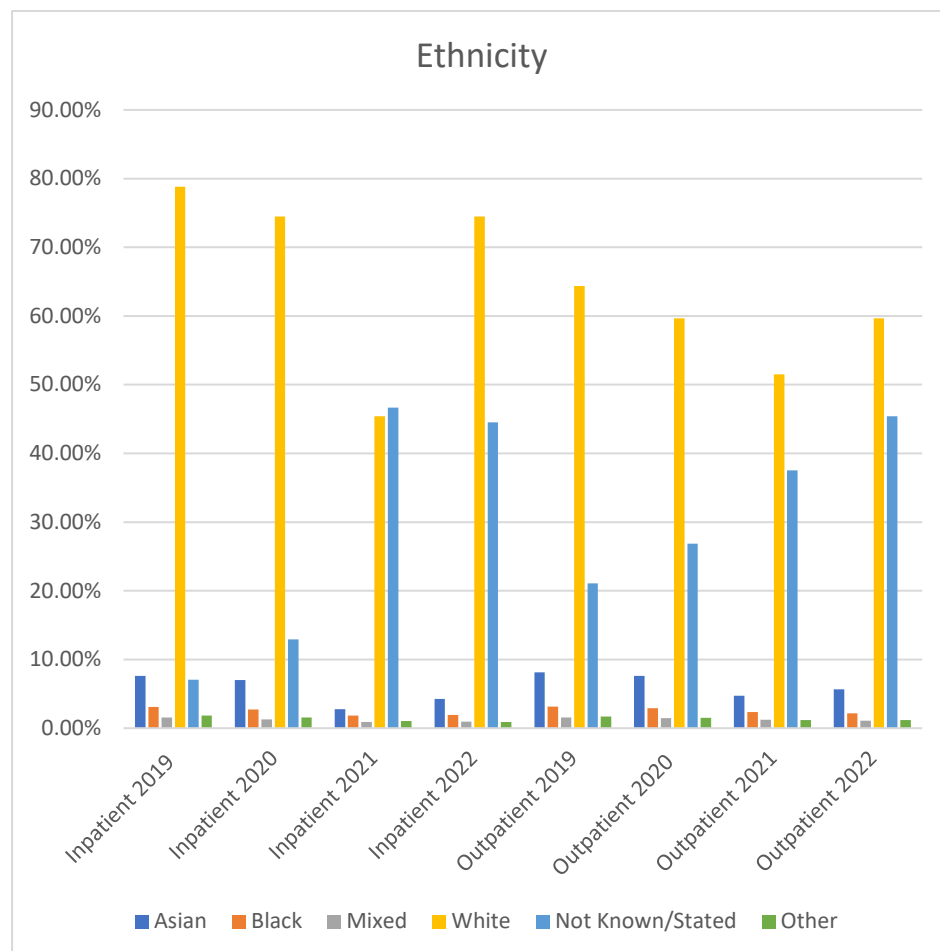
Gender

This data remains largely unchanged from 2021

Gender
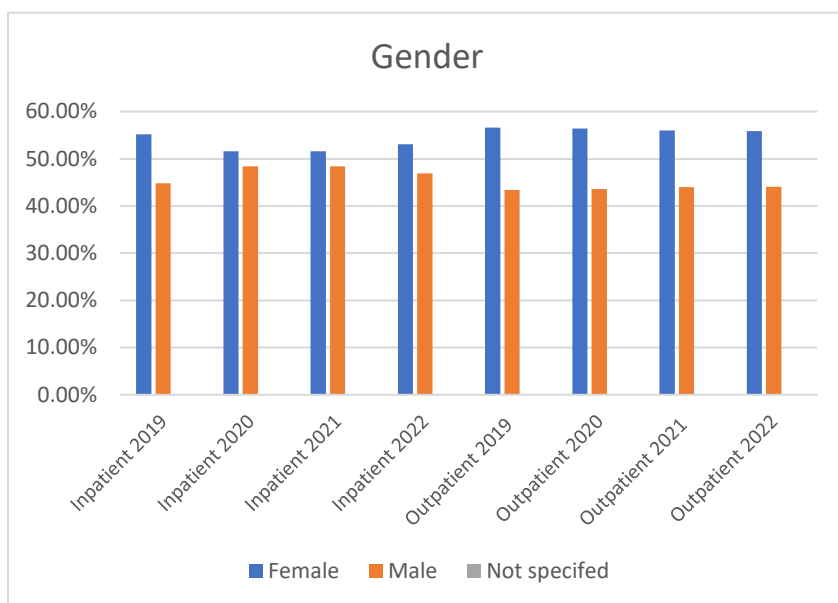
Age

The data show little change from the previous years. However, it is useful to note the age profile of our patients is concentrated between the age groups of 41-80 years.

Age

Marital Status

Martial Status

Patient Languages spoken

2022

	Inpatient data	Outpatient data
Spoken language	**%**	**%**
Arabic	0.16%	0.37%
Bengali	0.13%	0.28%
English	91.30%	89.06%
Hindi	0.01%	0.07%
Kurdish	0.08%	0.11%
Not Specified	5.85%	6.52%
Panjabi; Punjabi	0.36%	0.67%
Persian	0.04%	0.16%
Polish	0.34%	0.37%
Urdu	0.72%	1.13%

2021
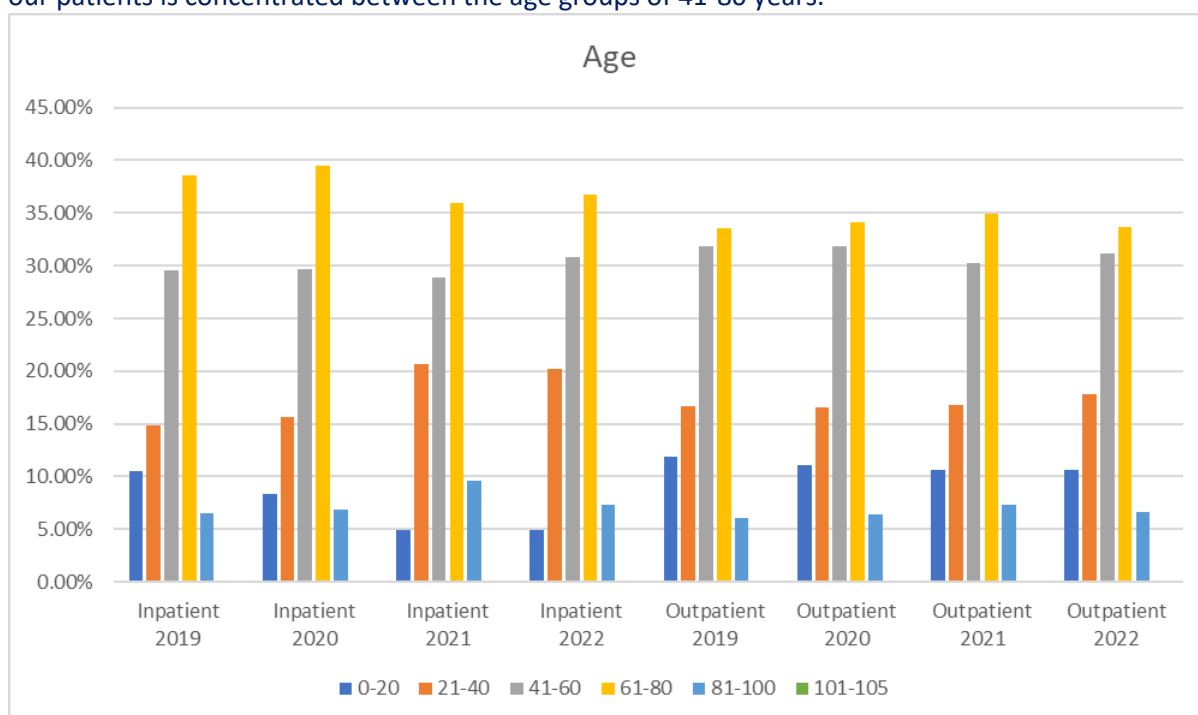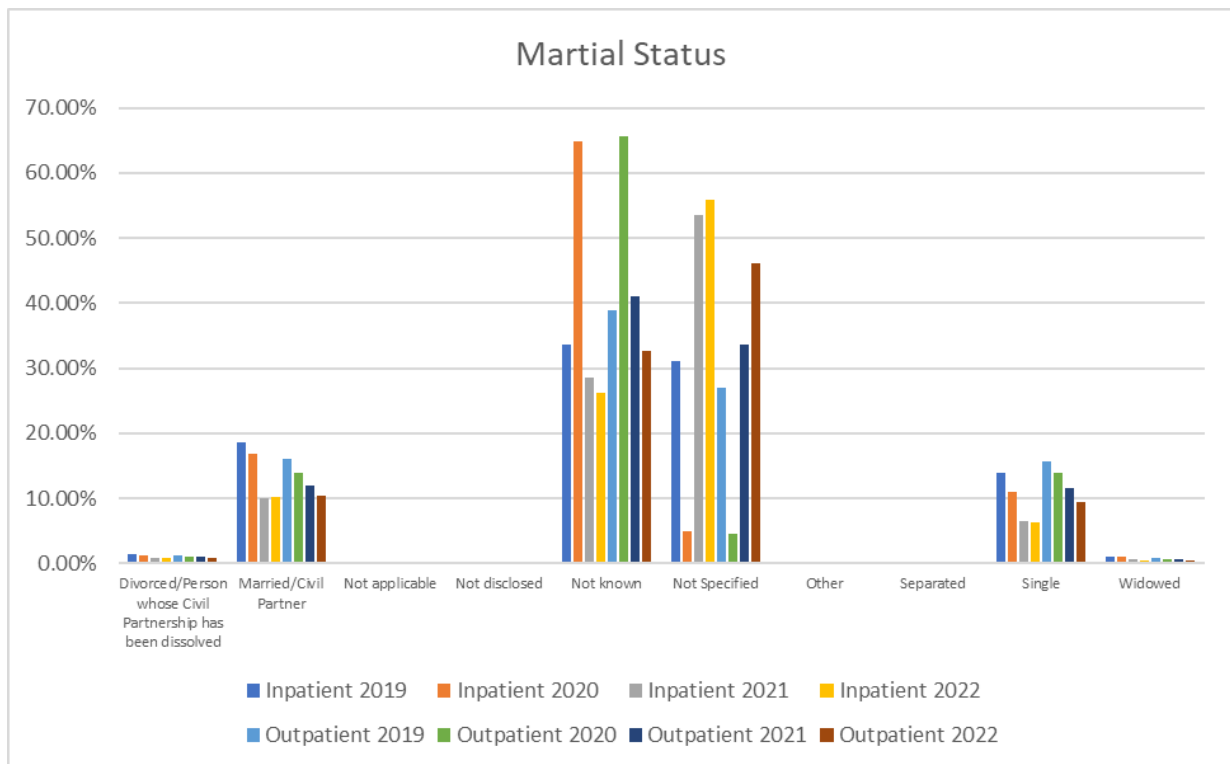
	Inpatient data	Outpatient data
Row Labels	**%**	**%**
Arabic	0.22%	0.33%
Bengali	0.11%	0.18%
English	86.26%	83.93%
Kurdish	0.08%	0.11%
Not Specified	10.88%	12.47%
Panjabi; Punjabi	0.53%	0.57%
Persian	0.08%	0.11%
Polish	0.33%	0.33%
Urdu	0.68%	0.94%

2020

	Inpatient data	Outpatient data
Spoken Language	**%**	**%**
Arabic	0.12%	0.31%
Bengali	0.15%	0.19%
English	88.35%	85.85%
Kurdish	0.11%	0.11%
Not Specified	9.13%	10.61%
Panjabi; Punjabi	0.44%	0.55%
Persian	0.08%	0.10%
Polish	0.27%	0.31%
Urdu	0.56%	0.87%

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Religious Beliefs

2022 Row Labels	Inpatient data %	Outpatient data %
Agnostic	0.40%	0.44%
Arya Samaj Hindu	0.22%	0.34%
Atheist	0.46%	0.61%
Baptist	0.10%	0.09%
Celtic Christian	5.55%	6.01%
Church of England	5.17%	5.14%
Jewish	0.16%	0.09%
Methodist	0.19%	0.21%
Muslim	1.12%	1.61%
Not Religious	0.68%	0.66%
Patient Religion Unknown	82.08%	80.67%
Roman Catholic	2.92%	2.87%
Sikh	0.32%	0.45%

2021 Row Labels	Inpatient data %	Outpatient data %
Agnostic	0.56%	0.53%
Atheist	0.80%	0.84%
Celtic Christian	8.73%	8.23%
Church of England	7.70%	6.71%
Jehovah's Witness	0.11%	0.11%
Jewish	0.11%	0.12%
Methodist	0.29%	0.26%
Muslim	1.88%	2.21%
Not Religious	0.89%	0.94%
Patient Religion Unknown	72.58%	73.95%
Religion not given - PATIENT refused	0.50%	0.42%
Roman Catholic	4.15%	3.87%
Sikh	0.66%	0.59%

2020 Row Labels	Inpatient data %	Outpatient data %
Agnostic	0.35%	0.45%
Arya Samaj Hindu	0.23%	0.37%
Atheist	0.62%	0.70%
Baptist	0.11%	0.11%
Celtic Christian	5.49%	6.82%
Church of England	4.44%	5.88%
Jewish	0.12%	0.11%
Methodist	0.15%	0.23%
Muslim	1.15%	1.66%
Not Religious	0.73%	0.73%
Patient Religion Unknown	83.02%	78.20%
Religion not given - PATIENT refused	0.24%	0.32%
Roman Catholic	2.62%	3.35%
Sikh	0.27%	0.46%

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Registered Disabled

Based on Patient data for registered disabilities in 2019 and 2020, the Trust was able to implement Access Able which is a resource to help patients and visitors with visible and hidden disabilities.
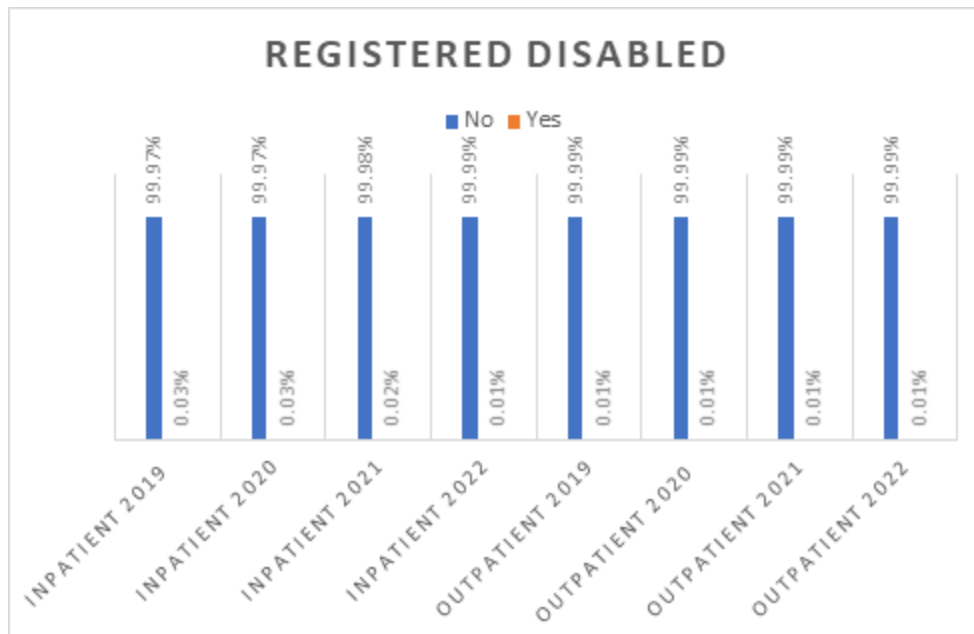
Further information

The information in this report gives an overview of the Equality, Diversity and Inclusion progress at the The Royal Orthopaedic Hospital in 2021/22. This report is also required to be completed as part of the NHS contract with the CCG. For more information, please go to our website

Home (roh.nhs.uk) or contact Clare Mair, Head of OD and Inclusion claremair@nhs.net

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Appendix I

WDES Data

Staff data was collected and submitted to NHS England in August 2021. The data period is 1st April 2020 to 31st March 2021 and is formulating into ten WDES Indicators.

An additional question is included for WDES (compared to WDES) around reasonable adjustments for staff members.

All NHS Trusts are required to collate and publish this information on their website.

Table One below shows ROH WDES Performance Data. As this is the first year of implementation there is no WDES comparison data. However, Table 3 shows comparison data for WDES data 2019

In Table Two data for Indicators 4 – 8 is collated from the National Staff Survey (NSS) results which staff completed between 8th October and 30th November 2020.

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Table One: Summary of ROH Trust WDES Indicators

WDES Indicator	Indicator Definition	ROH NHS Trust			Comments
		2019	2020	2021	
1	% of disabled staff	3.3	3.5	3.3 ↓	
2	Relative likelihood of disabled staff being appointed from shortlisted candidates compared to non-disabled staff	1.30	1.06	1.45 ↑	
3	Relative likelihood of disabled staff entering formal capability	0.0	0.0	0.0	
4	% of disabled staff experiencing harassment, bullying or abuse from patients or public in last 12 months	20.8 (19.8)	28.4 (19.2)	23.4 (13.3) ↓	
4a	% of disabled staff experiencing harassment, bullying or abuse from staff in last 12 months	31.3 (15.4)	22.0 (15.4)	29.0 (13.2) ↑	Staff survey question 2020
5	% of disabled staff believing the trust provides equal opportunities for Career progression or promotion	78.1 (87.5)	89.3 (90.4)	85.6 (88.5) ↓	Staff survey question 2020
6	% of disabled staff have felt pressure from their managers to come to work, despite not feeling well enough to perform duties	25.8 (21.2)	26.7 (19.0)	20.3 (16.6) ↑	Staff survey question 2020
7	% of staff saying they are satisfied with the extent to which the organisation values their work	60.4 (56.1)	53.7 (58.3)	36.5 (54.4) ↓	Staff survey question 2020
8	% of disabled staff saying their employer has made adequate adjustment(s) to enable them to carry out their work	75.0 (75.2)	80.9 (76.5)	74.0 (77.0) ↓	Staff survey question 2020
9	The staff engagement score for disabled staff compared to non-disabled staff and the overall engagement score for the organisation	7.2	7.2	6.7 ↓	Staff survey question 2020

Overview of WDES indicator 1

Indicator 1: percentage of staff in each of the AfC Bands 1-9 and VSM (including executive Board members) compared with the percentage of staff in the overall workforce. **Clinical Staff.**			
ROH			
	DISABLED	NON-DISABLED	UNKNOWN
Band 1	0	0	0
Band 2	2.44%	83.54%	14.02%
Band 3	0	92%	8%
Band 4	30%	70%	0
Band 5	1.81%	86.14%	12.05%
Band 6	5.03%	84.28%	10.69%
Band 7	2%	86%	12%
Band 8A	0	83.67%	16.33%
Band 8B	0	100%	0
Band 8C	0	100%	0
Band 8D	0	0	100%
Band 9	0	0	0
VSM	0	100%	0
Consultant	1.25%	73.75%	25%
of which senior medical manager	-	-	-
Non-consultant career grade	0	84.62%	15.38%
Trainee grades	0	76.47%	23.53%
Other	0	0	0
Overall % of Clinical Disabled Staff:	2.7%		
Overall % of Clinical Non-disabled Staff:		84.4%	
Overall % of Clinical Not Known:			12.9%

Indicator 1: percentage of staff in each of the AfC Bands 1-9 and VSM (including executive Board members) compared with the percentage of staff in the overall workforce. **Non-Clinical Staff.**			
ROH			
	DISABLED	NON-DISABLED	UNKNOWN
Band 1	0	0	0
Band 2	4.60%	63.22%	32.18%
Band 3	2%	88%	10%
Band 4	4.21%	73.68%	22.11%
Band 5	2.56%	79.49%	17.95%
Band 6	3.70%	88.89%	7.41%
Band 7	19.05%	71.43%	9.52%
Band 8A	0	90.91%	9.09%
Band 8B	0	92.86%	7.14%
Band 8C	0	100%	0
Band 8D	0	100%	0
Band 9	0	0	0
VSM	0	100%	0
Other	0	83.33%	16.67%
Overall % of Non-Clinical Disabled Staff:	4.2%		
Overall % of Non-Clinical Non-disabled Staff:		74.3%	
Overall % of Non-Clinical Not Known:			21.4%

WRES Data

Staff data was collected and submitted to NHS England in August 2021. The data period is 1st April 2020 to 31st March 2021 and is formulating into nine WRES Indicators. All NHS Trusts are required to collate and publish this information on their website. This information will be published following sign off from the Staff Experience and OD Trust Board committee.

Table One below shows ROH WRES Performance Data for all indicators comparing 2016, 2017, 2018, 2019 and 2020. National data is currently not available as a comparison. This information with national comparisons will be presented at a future Staff Experience and OD (SE&OD) meeting.

Data for Indicators 5 – 8 is collated from the National Staff Survey (NSS) results which staff completed between 4th October and 27thNovember 2020.

Table One: Summary of ROH WRES Indicators (2016 -2020)

WRES Indicator	Indicator Definition	ROH NHS Trust						Comments
		2016	2017	2018	2019	2020	2021	
1	% of staff BME	22.1	24.2	24.4	23.7	24.5	↑ 27%	Gradual increase. Work continues to address diversity in some areas at higher bands
2	Relative likelihood of White staff being appointed from shortlisted candidates compared to BME staff	1.99	1.45	1.64	1.70	1.36	1.55 ↓	The Recruitment Project completed in January identified additional work is needed to attract interest from diverse groups
3	Relative likelihood of BME staff entering formal disciplinary	1.17	1.01	1.33	1.83	2.48	1.44 ↑	Small number of cases: 8 in 2020 15 in 2021
4	Relative likelihood of BME staff accessing non-mandatory CPD	1.05	1.0	1.22	1.12	1.08	↑ 1.13	

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5	% of BME staff experiencing harassment, bullying or abuse from patients or public in last 12 months	19.2	15.9	15.63 (22.6)	13.7 (22.0)	16.5 (21.9)	15.6 (15.6) ↑	Listening sessions have provided a forum for staff to feedback in a safe environment
6	% of BME staff experiencing harassment, bullying or abuse from staff in last 12 months	30.4	26.6	45.31 (22.9)	31.5 (26.7)	25.0 (22.9)	24.8 (22.1) ↑	
7	% of BME staff believing the trust provides equal opportunities for Career progression or promotion	62.0	71.4	65.9 (86.5)	72.0 (89.6)	83.1 (92.2)	72 (91.7) ↓	Mentoring programme is starting to identify support needed. New MMEG chair appointed
8	% of BME staff personally experienced discrimination at work from a manager/team leader of other colleague member of staff	18.4	6.25	12.50 (6.3)	18.3 (7.0)	16.7 (7.6)	14.5 (6.3) ↑	
9	% of the full Board identifying as BME	0	0	0	0	11	↑ 28.6	

Overview of WRES indicator 1

Indicator 1: percentage of staff in each of the AfC Bands 1-9 and VSM (including executive Board members) compared with the percentage of staff in the overall workforce. **Clinical Staff.**			
ROH			
	BAME	WHITE	Not Known
Band 1	0	0	0
Band 2	39	125	0
Band 3	6	19	0
Band 4	1	9	0
Band 5	74	92	0
Band 6	47	112	0
Band 7	10	40	0
Band 8A	6	43	0
Band 8B	1	6	0
Band 8C	0	1	0
Band 8D	0	1	0
Band 9	0	0	0
VSM	0	1	0
Consultant	36	45	0
of which senior medical manager	0	1	0
Non-consultant career grade	21	5	0
Trainee grades	12	5	0
Other	0	0	0
Overall % of Clinical BME Staff:	30.6%		
Overall % of Clinical White Staff:		69.4%	
Overall % of Clinical Not Known:			0%

Indicator 1: percentage of staff in each of the AfC Bands 1-9 and VSM (including executive Board members) compared with the percentage of staff in the overall workforce. **Non-Clinical Staff.**

	ROH		
	BAME	WHITE	Not Known
Band 1	0	0	0
Band 2	29	145	0
Band 3	6	44	0
Band 4	12	83	0
Band 5	8	31	0
Band 6	6	21	0
Band 7	6	15	0
Band 8A	1	10	0
Band 8B	2	12	0
Band 8C	4	1	0
Band 8D	0	1	0
Band 9	0	0	0
VSM	0	4	0
Overall % of Non-Clinical BME Staff:	16.8%		
Overall % of Non-Clinical White Staff:		83.2%	
Overall % of Non-Clinical Not Known:			0%

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