

Strategic Equality Plan Annual Report 2019/20



1 April 2019 – 31 March 2020

"... Making a difference...We have to see people in the context of their lives and ask them what matters to them so that people make decisions that are right for them."

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Introduction

Our Strategic Equality Plan Objectives

Introduction

Hywel Dda University Health Board (the Health Board) is committed to putting people at the centre of everything we do. Our vision is to create an accessible and inclusive organisational culture and environment for everyone. This includes our staff, those who receive care, including their families and Carers, as well as partners who work with us whether this is statutory organisations, third sector partners or our communities. This means thinking about people as individuals and taking a person-centered approach, so that we treat everyone fairly, with integrity, dignity and respect, whatever their background and beliefs.

This Annual Report is an overview of some of the Health Board's key work to promote diversity and inclusion, and should be read alongside our:

- Hywel Dda University Health Board Annual Report
- Annual Quality Statement
- Annual Governance Statement
- Director of Public Health Annual Report
- Our 20-year strategy A Healthier Mid and West Wales: Our Future Generations Living Well
- Our Well-being Objectives Annual Report

The Equality Act 2010 is about treating everyone in a fair way. This law protects people from being treated worse than other people because they are:

- men and women
- disabled people
- young people and older people
- people who come from racial backgrounds who may speak another language and have different cultures
- people who follow a religion or who have no religious beliefs
- people who are gay, lesbian or bisexual
- people who are considering, undergoing or have undergone gender reassignment
- people who are in a civil partnership or married
- women who are pregnant or have recently had a baby.

We need to collect and use information about our staff and service users, and their experiences, to help us work in ways that ensure that we are treating people fairly. It is also important that our services are meeting the needs of all groups of people who we serve and that we treat people fairly at work.

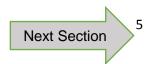
We use a range of methods to gather and collate information about our communities and our staff. These include:

- Siarad lechyd/Talking Health, our public engagement scheme and regular locality based public meetings and a process of continuous engagement;
- Engaging and consulting with staff and our communities through joint public sector events and surveys;
- Data gathered on our Patient Administration Systems;
- Feedback from patients about their experiences of using our services including compliments and complaints;
- Data gathered from staff surveys, as well as our Electronic Staff Record and grievance reports;

• Welsh Government initiatives and national reports, for example those published by the Equality and Human Rights Commission, Older People's Commissioner, Stonewall and others.

We are continuously working to improve the collection and reporting of equality data about people who use our services. This includes adapting our existing systems to collect the data as well as raising awareness of why the information should be collected and used to improve services and outcomes for patients. The same challenges apply to the collection of equality data for staff, although we acknowledge that some discussions need to take place on a national basis in order to change all-Wales information systems.





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About the Hywel Dda area

Hywel Dda University Health Board plans and provides NHS healthcare services for people in Carmarthenshire, Ceredigion, Pembrokeshire and bordering counties. Here are a few facts, but for more information please see our Health Board Annual Reports and Annual Quality Statements <u>here</u>.



We recognise that there are many people within our populations (including many from protected groups) who experience socioeconomic deprivation, which is a key factor in poorer health and lack of opportunity to access education and employment, thereby perpetuating the cycle of deprivation. We aim to break this cycle, and in line with the aspirations of the Well-being of Future Generations (Wales) Act 2015, to create healthier, more resilient communities, working together towards a better future for all. Information on health and socio-economic factors across the three counties is available from the <u>Public Health Wales Observatory</u> and on the <u>Daffodil Cymru website</u>.

Demographics for the Hywel Dda region are available on the ONS <u>website</u>. Our population is also subject to temporary changes, with substantial increases in the summer months boosted by the tourism industry and by transient student populations throughout the year. Whilst we have been actively involved in national refugee resettlement programmes, numbers for ethnic minorities, transgender, gay and bisexual people and Gypsy, Roma & Travellers continue to appear to be comparatively small when viewed across the three counties as a whole. We recognise that this means we must continue striving towards ensuring that they have opportunities to communicate their needs, to have services provided appropriately and to have equal opportunities for employment and career progression.

There are high concentrations of Welsh speakers in some areas across the three counties, though the 2011 Census exhibited a drop in the numbers of Welsh speakers. We collect information on Welsh speakers in a number of ways; we ask our staff to register their Welsh language skills on their Electronic Staff Record (ESR) and provide an active offer to patients who may wish to receive their services in Welsh. We have an action plan in place to fulfil the requirements of the Welsh Language Standards through our Bilingual Skills Strategy. Our Welsh Language Annual Monitoring Reports can be found <u>here</u>.

The Workforce and Organisational Development Team continue to deliver the all Wales Workforce Information System strategy, which includes compliance with minimum data set requirements. We maintain a high standard of data quality via Electronic Staff Records (ESR), which facilitates staff to own and manage their data. Reports consistently show that our workforce is predominantly female and the majority of our staff work full time, although more female staff than male staff work part-time. The age profile of our workforce generally indicates an ageing workforce with very few employees below the age of 20. However, different

staff groups show a variety of ages. Regular update reports on Workforce and Organisational Development activity and workforce trends are presented to the Workforce and Organisational Development Sub-Committee. Details of Workforce and Organisational Development Reports to Board can be found <u>here</u>.

The Health Board undertakes regular analysis of grievance and disciplinary procedures during each year against employees involved both as a complainant and as a person against whom a complaint is made. The NHS ESR system does not require this data to be collected currently, however local records are available and were analysed for the purposes of this report. Reports to Board on grievance and disciplinary issues can be found <u>here</u>. **Population Equality Information -** Appendix 1 provides a broad overview of the protected characteristics of our populations across our three counties, as evidenced in the 2011 Census.





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Our Strategic Equality Plan Objectives

Our Strategic Equality Objectives have been in place since they were first set in 2012. Engagement with our key stakeholders in 2016 indicated that they were still fit for purpose and we have continued to work towards the objectives we originally established. Link to SEP and Objectives 2016-2020. The following section of our SEP Annual Report provides a summary of some of the work which was undertaken during 2019/20 towards meeting the objectives set out in the above document.

This will be the final report for the period covering 2016-2020 as the Health Board has refreshed its equality objectives for 2020-2024. <u>Link to SEP and Objectives 2020-2024</u>. The following chapters of the report provide examples of how we have been delivering our strategic equality objectives during the year April 2019-March 2020.

Our Strategic Equality Plan and Objectives are built around the following themes:

Leadership and Corporate Commitment

Strategy and Services

Public and Patient Involvement

Health

Workforce and Employment

Partnership

Leadership and Corporate Commitment

This year, our Chief Executive, Steve Moore had the privilege of giving one of the keynote speeches at the annual Stonewall Cymru Conference held in the Civic Centre in Cardiff in February 2020. In addition to giving a strong message in support of LGBTQ+ equality, the speech also emphasised the importance of "seeing the whole person" and not just one aspect of an individual. Our Chief Executive highlighted the importance of "**people striving together to be the best we can be**" – echoing the ethos of our Health Board values, supporting diversity and the wider equality agenda.

At our "This is Me" Conference in July 2019, held in collaboration with Swansea Bay University Health Board, our Chief Executive, together with the Director of Partnership and Corporate Services, gave keynote speeches strongly supporting diversity and inclusion in the workplace. Other clinical and non-clinical staff were also involved in sharing their experiences. More details on the conference are included in the "Workforce and Employment" section of this report.



Picture - Stonewall Cymru Conference



Strategy and Services

Delivering services which are safe, sustainable, accessible and kind are key principles within our 20 year Health and Care Strategy - <u>A Healthier Mid and West Wales: Our Future Generations Living Well</u>. Our approach to transforming our services ensures that staff, patients and our wider population are central to our work, both as an organisation and as a partner, as we continue to respond to our responsibilities under the Equality Act 2010, the Well-being of Future Generations (Wales) Act 2015 and the national goal of a More Equal Wales.

The Health Board has established the Enabling Quality Improvement in Practice Programme (EQIP) which brings together multidisciplinary teams to work on quality improvement initiatives. The first EQIP programme commenced June 2019 with eleven project teams with members spanning a range of professional groups including: Doctors, Nurses, Managers, Therapists, Administrative Staff, Health Care Support Workers, Social Workers and Radiologists. The intention of the programme is to increase capacity and capability for improvements across the Health Board to drive a culture of continuous improvement. Equality considerations form part of the project management process and a training session was delivered to 100 EQIP participants in August 2019.

Some examples of quality improvement initiatives are outlined below:

"Shared Care Model" and "Admission Avoidance" – this project involved the development of a model of care for patients with physical illness and cognitive impairment. This introduced a whole system approach and integrated care to meet care needs, regardless of location.

"**Communication**" – this project worked on improving processes for communication with patients on waiting lists, with the aim of reducing anxiety caused by lack of understanding of care pathways and promoting shared decision making and self-management, giving patients autonomy over their treatment and care plans. The Health Board is adding to the ways that we communicate by introducing mobile and landline messaging services to improve the patient experience and reduce missed appointments e.g. Outpatients SMS reminder - see Link to website.

Improving access to services

My Health on Line (MHoL) is currently being used by some GP practices for patients to make appointments and the Health Board is encouraging the continuing roll out more widely across the three counties. Work has also been on-going to raise awareness with GP reception staff of additional communication methods such as Next Generation Text (NGT) – now known as Relay UK. Some GP clusters have purchased tablets to be used to access online interpretation services.

Approximately 70% of GP Practices will shortly begin to use eConsult, an online consultation service that links patients to their GP and allows them to submit consultation requests to their GP practice. It also allows patients to access self-care, pharmacy, local self-referral service and appropriate signposting, without having to switch to a digital provider or register for additional services. This service will improve access to services for patients with sensory loss. To meet the requirements of the Access to in-hours GMS Service Standards, the Health Board is aiming for 25% of all pre-bookable appointments to be bookable through a digital solution (e.g. MHoL) and 100% of practices offering access to repeat prescriptions through a digital solution (e.g. MHoL). We have set a deadline of the end of March 2021 to achieve this. Community nursing teams are also seeking to improve the accessibility of appointment systems and develop a range of communication models.

The Health Board is currently developing an Accessible Communication and Information policy and will include additional guidance on the Accessibility Regulations for websites and mobile applications.

Raising Awareness of equality, diversity and inclusion

During 2019/20, the Strategic Partnerships, Diversity and Inclusion team delivered awareness raising training to a number of Health Board teams. Working with trainers with lived experience, staff were able to access training on the following subjects:

- Trans Awareness
- Sensory Loss
- BAME Cultural Awareness
- Learning Disability Charter
- Carer awareness

The Team also worked with the Primary Care Leads to remind them of the requirements of the all Wales Standards for Accessible Communication and Information for People with Sensory Loss, to identify and address any accessibility issues. They also attended the Primary Care GMS Access and Sustainability Forum, to support progress with accessible appointment systems and implementation of the Access to in-hours GMS Service Standards.



Public and Patient Involvement

In January 2019, the Health Board approved a Framework for Continuous Engagement, which embedded our approach to involvement. We have introduced a "Check and Challenge" approach to provide the Health Board with assurance that delivery of our Transformation programmes, associated projects, service changes and pathway re-design is fully aligned and consistent with the principles set out within the Health Board's equality objectives and Public Sector Equality Duties. The check and challenge process includes input from the Engagement Team and Diversity and Inclusion Team, who work closely together to advise and support on mechanisms to engage with protected characteristic and other vulnerable/under-represented groups.

During the year April 2019 to March 2020, we undertook a series of continuous engagement events with our staff, patients, people in our communities and those delivering, or interested in, health, care and well-being. In total, 20 engagement events were held between April 2019 and mid-February 2020. Events, comprising workshops, focus groups and drop-in events were held across our three counties in locality hubs at a variety of accessible venues. Topics included the development of a Patient Experience Charter, Trauma Services, Health and Wellbeing and Asset Mapping. Some planned for later in February/March 2020 were cancelled due to the Coronavirus outbreak but in total, the events held attracted over 880 attendees.

Our Patient Advice and Liaison (PALS) Team regularly visit our wards and clinic areas to engage with patients, families and Carers whilst using our services. A new digital (electronic) system - Friends and Family Test – has been introduced to allow all staff to capture patient experience feedback (both positive and negative) in real time so that it can be acted upon or escalated as necessary in a timely manner. The system allows us to review this feedback against other sources of information to identify where we need to make improvements or share good practice that others can learn from. Leaflets and Posters about our PALS team, Friends and Family Test, and Putting Things Right have been distributed to all wards, receptions and public areas in community

and primary care and the replenishment of leaflets and posters is continuously ongoing. We continue to ensure that patients can easily access written information on how to leave patient experience feedback including compliments, opportunity to complete surveys or raise concerns or complaints. Link to Putting Things Right Webpage.

As part of a Welsh Government initiative to capture patient feedback from Accident and Emergency (A&E) departments, in January 2020, feedback terminals were installed using the smiley face options of recording feedback as well as a free text option.

Working with our partners, the Health Board has co-ordinated a Community of Practice group for continuous engagement, involving a wide range of organisations, including our Public Service Board partners. Wherever possible we seek opportunities to engage and consult together, and an example of this was our regional work to engage the public on the setting of new strategic equality objectives. The Health Board are in the process of considering a number of digital public engagement packages in order to improve access to engagement opportunities for everyone, particularly protected groups and those who are marginalised, as part of our commitment to continuous engagement and involvement.

During the year, the Health Board's Stakeholder Reference Group (SRG) identified concerns regarding the lack of children and young people representation within the group. The Engagement Team was tasked with liaising with county youth forums to ensure closer links were developed and as this work, evolved, natural links were made to exploring the potential of a Children's Board / Network and embedding the Rights of the Child across the organisation. Visits to Swansea Bay and Cardiff and Vale University Health Boards, and discussions with Wales Ambulance Services Trust (WAST) provided insights into their approaches, and this information together helped provide a basis for developing an approach for Hywel Dda.

A meeting with the Children's Commissioner has been very positive and we will work closely with her office to implement an ambassadors scheme. The Commissioner welcomed the multi public sector partner approach to the Community of Practice and is happy to provide training for all our staff on the rights of the child and practical ways to engage effectively.

Close links with the Office of the Police and Crime Commissioner (OPCC) for Dyfed/Powys Police identified opportunities to work together to gather the views of seldom heard young people around crime, health and wellbeing. We worked with participants from a diverse range of backgrounds in different areas across the Hywel Dda area using different methods including a questionnaire and focus groups. The report was presented at the OPCC's Ein Llais/ One Voice youth conference in March 2020. Building on this partnership work, the Health Board and OPCC jointly funded a post responsible for progressing the youth engagement agenda, a key priority for both organisations.



Health

Our commitment to work in an integrated way across health and social care at regional and locality level is helping us to plan, develop and deliver services that work better for people, and are far less complicated and quicker to access. It also enables us to build our shared ambition to develop community resilience, prevent ill health, improve well-being, and promote independence and interconnectedness. This is demonstrated through our achievements on developing and implementing new models of service delivery and care pathways as we implement our Health and Care Strategy <u>"A Healthier Mid and West Wales: Our future generations living well"</u>.

Twilight Sanctuary in Llanelli

In September 2019, working in partnership with Dyfed Powys Police and Carmarthenshire County Council, the Health Board launched a ground breaking out of hour's mental health service – the Twilight Sanctuary - for adults in Llanelli. Working together with Mind and Hafal, the service runs from the Mind Centre in Llanelli. The Twilight Sanctuary is the first of its kind in Wales, open Thursday to Sunday from 6pm to 2am, offering early access to help and a place of sanctuary for adults at risk of deteriorating mental health, when other support based services are closed. This service fulfils the following key aims of our new model of providing mental health services:

- Community focus to stop admitting people to hospital when it isn't the best option and provide support in the community when people need time away from home, extra support or protection.
- Recovery and resilience services that don't purely focus on treating or managing symptoms, but instead help people to live independent, fulfilling lives with the help and support they need.

A short video had been produced to promote the service and can be viewed here: <u>Twilight Sanctuary</u>

Greg Thomas, Interim Chief Officer, Llanelli Mind said:

"Llanelli Mind are delighted to be involved in this exciting new project, the first of its kind in Wales, working with our partners in the health board, local authority, Hafal, Dyfed Powys Police and Welsh Ambulance Service NHS Trust, to provide a much needed service 'out of hours'.

"We very welcome the opportunity to work with and support people in managing and maintaining their mental health and wellbeing, in a welcoming and homely environment, that wherever possible avoids the need for people to access more acute services."

Learning Disability Charter

Board members of Hywel Dda University Health Board have pledged to do what they can to ensure people with learning disabilities have the same rights and choices as everyone else. As part of this commitment Executive Directors and Independent Members have signed "My Charter". This is a charter written by the Dream Team, people with learning disabilities in west Wales who are supported by Pembrokeshire People First, which sets out what they expect and want in life. By signing, people express their agreement, and pledge, to do what they can to make the charter a reality in work, with family and friends and in their communities. The Charter can be found here: Learning Disabilities Charter.

Speaking at a public health board meeting, James Dash, from Narberth, and Chair of the Dream Team, explained

"We are really pleased the Health Board is signing up to our charter, which represents the wider learning disability population. We want the same things as everyone else. We want more chances in life, more choice and to be listened to and treated as adults. Our next step will be to audit the changes taking effect." The Dream Team received an NHS Wales Award in 2019 for their work to empower people and a video detailing the charter and featuring stories of people in west Wales with learning disabilities is available at <u>http://www.pembrokeshirepeople1st.org.uk</u>.



Picture: Members of the Dream Team receiving an NHS Wales Award

Carys James, Co-Chair of the Learning Disability Programme Group and Director of Social Services for Ceredigion explains:

"This is not a project led by professionals, or social services – or even charities. In the coming months, it will be turned over entirely to The Dream Team, a group of people with learning disabilities who advise us on what really matters and hold us absolutely to account. They will be visiting businesses and organisations to get them to sign up – and checking that they really do follow through on their commitments.

"We're doing things differently in West Wales. And we're very proud of the Dream Team and committed to measuring everything we do against the Charter's demands.

"Signing the Charter is just the beginning. It's not enough to sign – organisations and individuals have to act on what they pledge, and the Dream Team will make sure that they do."

QR code hubs

Community pharmacies across Hywel Dda are using QR codes on 'Health Information Hubs' to share the most up to date health advice and information with their patients, such as the Common Ailments Scheme as well as links to self-help leaflets for chronic diseases. The information hubs can be updated remotely so that the detail behind each QR code can easily be kept up to date. The advantages of using digital technology include a reduction in paper leaflets as well making information accessible and offering discretion for patients who wish to obtain information. Patients who do not have access to a smartphone are still be able to collect information in paper format. The hubs are now in almost all community pharmacies within Hywel Dda. To find out more about the services your local pharmacy offers, please visit: www.hywelddahb.wales.nhs.uk/communitypharmacy

Pharmacist Dave Edwards of Edwards Healthcare said:

"The Health Information Hubs are bringing pharmacy information leaflets into the 21st Century. They will empower patients to take control of their health, and take responsibility for their wellbeing."

Pharmacist Gareth Harlow of Harlow & Knowles in Penygroes has also praised the introduction of the hubs:

"We have been displaying the QR for the last few weeks and it has generated a lot of interest from patients of all age ranges. I was pleasantly surprised how easy it is to use and think it is brilliant that patients can now get up to date information so quickly and easily on their phone by scanning these QR pods."



Jill Paterson, Director of Primary Care, Community and Long-term Care for Hywel Dda University Health Board said: "We are delighted to launch yet another resource for patients with our colleagues in community pharmacy and recognise the range of enhanced services they can offer, often as a first point of contact, which has extended the role they play in the community. The new Health Information Hubs are a convenient way for patients to access a range of medical and healthy lifestyle information and advice. Our community pharmacies do a lot more these days than simply dispense medication and in some cases they can save a trip to a GP or an Accident and Emergency Department and as you don't have to make an appointment they offer a quick and flexible way to access healthcare and health information."

New Health Passport gives children a voice when visiting hospital

My Health Passport is a new way for children and young people with learning disabilities or complex health needs to share important information about themselves when accessing care in the Health Board. Developed by two staff members - Donna Richards, Wellchild Nurse and Janet Millward, Senior Paediatrics Manager – this was kindly produced by WidgitHealth. My Health Passport is a simple but important document that will empower children and young people and their families to communicate their

needs, wishes and values to those caring for them. Using Widgit symbols, the passport contains three sections; things you must know about me; things important to me; and my likes and dislikes. My Health Passport is available as a free download in English and Welsh from

https://widgit-health.com/downloads/my-health-passport.htm

Janet Millward, Senior Paediatrics Manager, said: "Letting our staff know their wishes, values and daily routines will help us do what we can to meet their needs which we hope will make a significant and positive impact on their time in hospital."

George Owen from Llandysul is four years old and suffers from a very rare gene mutation which causes medication resistant epilepsy. Along with other problems, as a result of the seizures, George also suffers from temporary paralysis. George, mum Kirsty and dad Stephen are one of the first families to receive the new health passport. It is theirs to keep and show hospital staff when they meet George. Kirsty, said: "George's condition is rare and this passport will help staff understand his condition and treatment but most importantly it will let them learn more about George and what is important to him."

Cai Griffiths from Glanamman is eleven years old and lives with Spinal Muscular Atrophy (SMA), a genetic disorder that results in the loss of motor neurons and progressive muscle wasting.

Cai, said: "I enjoyed filling in this passport and I think that the benefits are doctors, nurses and play staff understand me and my needs. This passport will help me have my voice in hospital and not have decisions made for me". Lilly Kendall from Llanelli is 12 years old and has lived with complex heart and lung conditions since she was 10 days old, resulting in a heart and lung transplant last year. During the course of her young life, Lilly has needed care and treatment at many different hospitals including Glangwili Hospital, Bristol Children's Hospital and Great Ormond Street Hospital. Lilly has been presented with one of the first copies of the health passport to keep with her whenever she visits hospital. Lilly, said: "This will help everyone know a bit more about me and know what I've been through as I am pretty unique. This passport will help me have my voice in hospital and be 100% involved in decisions that involve me, because I know so much about my condition and I'm happy to talk about it".

Sensory Loss Awareness

During the first quarter of 2019/20, the Health Board undertook a service user audit of our Emergency Department from a sensory loss perspective, in order that key aspects of their care and needs can be addressed within this very challenging environment. Staff within this department also received sensory loss awareness training from a service user with lived experience of visual impairment, accompanied by their guide dog. This enabled staff to hear first-hand what it is like to access services if you are visually impaired, to learn how best to interact effectively and appropriately with people with visual impairment (and their dog where applicable) and how to ensure patient dignity is preserved.

Sensory loss awareness sessions were also held across the Health Board during Sensory Loss Awareness month in November 2019, which included demonstrations of equipment and personal stories relayed by guide dog users. Audiology Reception staff, together with other key, patient facing staff have been offered places on a full Deaf Awareness Course and module one of BSL Level 1 course, with exam. Audiology Reception staff have been issued with laminated information sheets on effective communication strategies for those with sensory loss.



Workforce and Employment

Our staff are our greatest asset and we have implemented a number of employment initiatives during 2019/20 to enhance the opportunities available for employment and career progression.

Grow your Own

Our <u>"Grow Your Own</u>" initiative supported 35 health care support workers to enrol on undergraduate nursing degrees and 32 staff are participating in professional development as part of the scheme.

Kerry Jones, Registered Nurse pictured on the left said:

"Without the support of Hywel Dda there is no way I would have been able to achieve this and reach my goals and my dreams...It makes you hungry, it makes you want to go and do more."



Made in Hywel Dda

A new Apprenticeship Scheme, "Made in Hywel Dda", was launched in September 2019. The Health Care Apprenticeship Programme is an exciting opportunity that enables participants to train to become a fully registered nurse through work-based learning. The Strategic Partnerships, Diversity and Inclusion Team presented a session on the Induction programme for the first cohort of Apprentices, emphasising the importance of person centred care and delivering equitable services.

Apprentice Academy

The Hywel Dda Apprentice Academy provides an excellent opportunity for people looking to join the NHS. Whilst on a structured work-based learning programme, individuals have the opportunity to learn while they earn, gaining nationally-recognised qualifications through a college or training centre. Apprenticeships can take between one and four years to complete and are available to anyone from the age of 16 years old. More details can be found on the following <u>link</u>, including feedback on the experiences from our first cohort of Apprentices.



Amanda Glanville, Senior Workforce Advisor said "I am passionate about providing development

opportunities for Individuals of all ages I am very excited to welcome and support new apprentices into the NHS. This is such an exciting time for the Health Board".

"This is Me Conference"

On 4th July 2019, the Health Board held its first ever conference for staff, in collaboration with Swansea Bay University Health Board, themed around diversity and inclusion in the workplace. Hosted by the Strategic Partnerships, Diversity and Inclusion Team, it was held at the National Botanic Gardens of Wales and included a range of in-house and external speakers.

The purpose of the conference was to raise awareness of the diversity of staff across the two organisations, to illustrate the benefits of a diverse workforce and the importance of breaking down barriers and supporting staff to be the best they can be. Staff speakers from both health boards and partner health boards shared their personal stories through the day, covering a range of topics, including sexual orientation, gender identity, disability, race, religion and belief, domestic abuse and mental health.

The Health Board was also pleased to have the support of Ysgol Gymraeg Ffwrnes school choir, who performed for attendees using British Sign Language while they sang their song. "Hospital Notes", our own diverse staff choir (pictured to the right) provided entertainment prior to the start of the event and during the lunch break. During breaks, participants also had the opportunity to talk with our hospital chaplain and a representative from the West Wales Islamic Cultural and Education Centre and to take time out to spend a few quiet moments in the Sensory Garden with representatives from our Staff Psychological Wellbeing Department.





The resounding message from all who participated was that supporting staff to be themselves in the workplace and to continue along their chosen career path reaps dividends, for individuals, the organisation and has a positive impact on patient care. Chief Executive of the UHB, Steve Moore, spoke at the event and said "For Hywel Dda acceptance is at the heart of our values, working together to be the best we can be. People striving together."

Everyone who attended the conference was encouraged to post messages on social media, which attracted significant positive support and July 4th 2020 saw a huge spike in activity on the Hywel Dda University Health Board Facebook page, with page previews up 1000%, views up by 423% and Likes up by 234%. A post-conference video was also published and disseminated widely Link to 'This is Me' Conference Video.



Encouraging innovative practice

At our "This is Me" Conference, the Health Board launched a Diversity and Inclusion Innovation Fund aimed at encouraging wards and departments, teams and individuals to undertake initiatives to contribute to improving staff and patient experience, with a diversity and inclusion focus. Application for funding comprised a business case to identify the aim of the initiative, expected outcomes and how good practice may be shared across wards and departments. Successful applications were awarded a small amount of funding for projects and initiatives that advance equality and improve the health of vulnerable and protected characteristic groups, staff and patient experience.

One example is ICU, where funding was given towards piloting critical care patient support group meetings for a 6-week period and a Christmas Dinner get together for previous patients, family members and staff and their families. As well as giving the opportunity for people to share their experiences and learn from each other, the meetings included specific talks from guest speakers, such as dieticians, neuro-psychologists and others, helping participants to learn more about how to enhance their lives after their life-changing experience.

"Without this wonderful nurse-led group, my life would still be one of confusion and frustration."

"When the letter arrived inviting me to the group, I immediately felt lifted..."

"We were also able to talk to other ex-patients, which again I found hugely helpful."

Attracting a diverse workforce

The Health Board launched some specific recruitment campaigns to promote diversity and inclusion as outlined below:

- the "I am..." recruitment campaign in Autumn 2019 showcased staff with a range of characteristics including protected characteristics to demonstrate the diversity of the health board and encourage a broad range of staff to apply for posts <u>https://www.youtube.com/watch?v=wq-HIOThZtc</u>
- A recruitment campaign for overseas doctors which is in Arabic Link to Recruitment Campaign Video
- A recruitment campaign for the Radiology Service Link to Video

We have also collaborated with Swansea University and Pembrokeshire College and recruited to the Destination NHS Programme. The aim of Destination NHS is to develop health professionals from our local population, and raise awareness of career opportunities within the NHS in general as we aspire to become an employer of choice. We wish our staff experience to be the best possible and I undertake regular staff surveys including exit interviews and pulse surveys to monitor experiences.

Positive about LGBTQ+

All new staff members receive information about our LGBTQ+ Staff Network, Enfys, as part of our corporate staff induction sessions. The Health Board is a long-standing Stonewall Diversity Champion and Enfys members were involved in submitting evidence for the Stonewall Diversity Champions Index in September 2019, and participated in a feedback meeting with Stonewall Cymru.



In February 2020, to coincide with LGBT History Month, the Health Board purchased rainbow flags and lanyards for staff to display,

as part of its action to raise awareness of, and combat prejudice against the LGBT community, reinforcing the health board's commitment towards being an LGBT inclusive employer.

As Stonewall Diversity Champions, the Health Board has the opportunity to send representatives to the Annual Stonewall Cymru Workplace Conference. This year we were pleased to be able to support four staff representatives to attend the conference, held in Cardiff on 14th February 2020. Representatives included the Chair of Enfys, our LGBTQ+ Staff Network and three members of the Strategic Partnerships, Diversity and Inclusion team, in addition to our Chief Executive who was one of the keynote speakers. It is hoped that over time, a wider range of staff will take up the opportunity to attend the conference.

Employers for Carers

Carers have responsibilities that have a substantial impact on their working lives. They are often responsible for the care and support of older, disabled or ill family and friends who are unable to care for themselves. As a significant employer within the area, the Health Board is aware that many employees may be juggling caring responsibilities at home while carrying out their valuable work in the Health Board and pursuing their careers.



Carers UK developed 'Employers for Carers' (EfC), a resource for employers to help to support their working Carers. As members of the West Wales Regional Partnership Board (RPB), the Health Board supported the establishment of a West Wales Employers for Carers consortium, and has established its own Employers for Carers task and finish group, led by the Health Board's Vice Chair. This group has completed a baseline assessment and considered what can be done to improve support for Carers within the workforce.

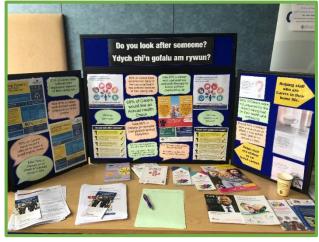
In March 2020, the Health Board successfully completed the Carer Confident benchmarking scheme level one, and is able to display the Carers Confident Logo. The Carer Confident benchmarking scheme supports employers to build a positive and inclusive workplace for staff who are, or will become, Carers and to make the most of the talents that carers can bring to the workforce.

The Health Board includes a focus on Carers within its corporate induction programme for all new employees. Since introducing this element in to the induction programme in October 2018, 1173 new staff employees, across a wide range of professional groups and departments, have received information about Carers, including how to identify and support carers whether they are staff members, patients or their Carers. This has been a great opportunity to raise awareness within the Health Board and ensure employees are thinking about Carers rights from day one of their employment.

During the year we also conducted an in-house Carers survey to support our work towards "Employers for Carers" and found the following emerging themes raised by our staff who are Carers:

- Taking annual leave to manage appointments, care for relatives, travel to parents.
- Have not applied for promotion or have felt excluded due to caring role.
- Working flexibly to manage appointments.
- Suffering from tiredness, anxiety and stress due to caring role.
- Some periods are worse than others, however one felt they had been supported in the workplace.

The Employer for Carers group will be working on the above issues during the coming year to improve the work/life balance for Carers within our workforce, with a view to providing a flexible and considerate work environment to help them stay in work and progress their careers.





Partnership

Throughout the year, we maintained and strengthened existing partnerships and forged new ones. Some examples are highlighted below, many of which have already been referred to earlier in the report:

- The Llanelli Twilight Centre is a collaboration between the Health Board, Dyfed Powys Police, Carmarthenshire County Council, Hafal and Mind.
- The Learning Disabilities Charter was produced together with The Dream Team, Carmarthenshire and Pembrokeshire People First. Locally, it is supported by the Regional Partnership Board West Wales Care Partnership, as well as county councils in Carmarthenshire, Ceredigion and Pembrokeshire, the Health Board and Pembrokeshire College.
- Our Destination NHS Programme is a collaborative initiative between the Health Board, Swansea University and Pembrokeshire College.
- We hosted a joint Diversity and Inclusion themed conference with Swansea Bay University Health Board.
- BAME (Black, Asian and Minority Ethnic) cultural awareness training (focusing on refugees and asylum seekers and migrant workers) was co-ordinated by the Health Board in conjunction with EYST (Ethnic Youth Support Team). The training was delivered to health staff and multi-disciplinary teams, invitations were also extended to other partners including local authorities, Dyfed Powys Police and the Third Sector organisations.
- The Education Programme for Patients, in partnership with the Strategic Partnerships, Diversity and Inclusion team are working with local communities to develop a culturally sensitive education programme to be delivered in Arabic for those being resettled under the Syrian Vulnerable Persons Resettlement Scheme (SVPRS).

Porth Gofal

Embracing a person-centred approach, this facility provides residents with the means to identify the right help they need at the right time, so that they have a say in identifying solutions that best meet their needs. It also reflects the health board's proactive approach towards prevention and early intervention as core principles for the way it works. Porth Gofal is a partnership between Ceredigion County Council, the Health Board, and third sector organisations. Prevention Support Officers, a Senior Social Worker, Occupational Therapist, Physiotherapist and District Nurses.work alongside each other as a multi-disciplinary team with links with the third sector and dedicated input from Families and Children Services. Under the new model, the focus of assessments shifts from identifying problems and generating demand towards promoting the independence of residents.

The Pembrokeshire Integrated Voluntary Organisations Team (PIVOT)

PIVOT provides a single point of access to a 7-days a week service (from 9am-8pm), delivering low level community based support, through a caseworker model, to prevent unnecessary admission to hospital and facilitate early discharge arrangements. The volunteers provide transport home from hospital where there is no other transport available, and Care and Repair provide rapid access to adaptations where these would help someone return home. PIVOT was awarded Partnership of the Year at the UK-wide 2019 Community Transport Association Awards held in Manchester and representatives of the Team are pictured receiving the award.



Debbie Johnson, Development Manager at Pembrokeshire Association of Community Transport Organisations said:

"We are delighted to receive this award, which recognises how special the PIVOT partnership is within not just Wales but the UK as a whole. The success of PIVOT can be seen through the teamwork of all the partners involved, particularly including the dedicated Royal Voluntary Service (RVS) volunteer drivers, and the incredible impact the service has on the many patients who are supported every month through PIVOT to return, and stay, safely at home."

Elaine Lorton, the health board's County Director for Pembrokeshire added:

"I am so proud to see the team recognised at a national level. PIVOT plays a vital role in our community, supporting people to return safely home after being in hospital. This award showcases our joint approach to enhancing the support we can offer our local community and ultimately improving the patient experience. In our very rural area, good transport services are key and the volunteers make a real difference for our patients." In November 2019, the Health Board learnt that it had won four NHS Awards for different aspects of work:

Delivering higher value health and care - Implementing Healthy Footsteps a Partnership Approach with Podiatry and the Education Programme for Patients (EPP).

Empowering people to co-produce their care - The Learning Disabilities Dream Team in recognition of their work to produce a Learning Disabilities Charter.

Working seamlessly across the public and third sector - Hywel Dda UHB; MIND Cymru; Department of Work and Pensions – Working Collaboratively to Improve Vocational Outcomes for Individuals Accessing The Early Intervention in Psychosis Service.

Providing Services in Partnership across NHS Wales - alongside Aneurin Bevan UHB, Swansea Bay UHB, Cardiff and Vale UHB and Cwm Taf Morgannwg UHB, Hywel Dda was acknowledged for work on the "South Wales Motor Neurone Disease Care Network".

Pictured below are staff receiving their awards. More information on each project can be found on the following link. Link to details of projects http://www.nhswalesawards.wales.nhs.uk/news/51631









Cross-cutting protected and vulnerable groups

We know that many protected groups are disproportionately represented among people who experience socio-economic disadvantage. During 2019/20, we have worked collaboratively with partner organisations to positively impact disadvantaged groups. Examples of work we have undertaken with Veterans, homelessness collaborations and work with other vulnerable and disadvantaged groups are available in our <u>HDdUHB Annual Report</u> and <u>Well-being of Future Generations Annual Report</u>.

A Veterans needs assessment developed by the local Public Health Team on behalf of the Health Board was adapted by Public Health Wales, and issued as an all Wales resource.

We are in the process of drafting a Hywel Dda homelessness needs assessment, with potential for this also to be used as the foundation for an all Wales resource. The Health Board leads the development, implementation and monitoring of the Homelessness and Vulnerable Groups Health Action Plan (HaVGHAP). The HaVGHAP is informed by local intelligence and regional strategies such as Local Authority Homelessness strategies, the Regional Partnership Board action plan and the Health Board's health and care strategy. The Health Action Plan is monitored and reviewed by the Homeless and Vulnerable Groups Partnership Forum and stands as a 'living document' that changes and is adapted according to current need and up to date evidence.

Caring for Carers

Our Investors in Carers quality assurance programme is an example of our partnership working. Whilst the Health Board leads the co-ordination of the scheme, collaboration with third sector Carers Service is embedded within the model to support settings in

achieving their Bronze, Silver or Gold award. The scheme currently has 115 bronze settings, 5 at silver and 2 at gold, with another 76 settings working on the scheme. Settings include GP surgeries, pharmacies, mental health wards, clinics and teams, secondary schools and colleges, social care teams, libraries, Job Centre plus and third



sector organisations, demonstrating collaboration, communities and partners. One rural village's GP surgery, Pharmacy and community run library has created a Carer Support group as a result in their Investors in Carers participation.

The number of unpaid Carers is increasing and in recognition of their contribution to supporting the care of family members the Health Board has commissioned a pilot project to establish four Carer Officers in Prince Phillip Hospital, Glangwili General Hospital, Withybush General Hospital and Bronglais General Hospital. The pilot project is a partnership between the Health Board and our local authority partners, and is being delivered by Carers Trust Crossroads Sir Gar, Gofalwyr Ceredigion Carers and Hafal Crossroads. Clare Hale, Strategic Partnership and Inclusion Manager said "The Carers Officers will play a vital role helping to support and provide advice to unpaid carers through their hospital journey, whether as a Carer and/or patient. The Carers officers will be working directly on hospital



wards and signposting to other services for support. They will support carers and educate staff on the issues facing unpaid carers to ensure effective liaison on areas such as hospital discharge."

Pictured is the Carers Officers left to right Al Frean, Ben Innocent, Karen Butler and Dawn Walters

Response to COVID-19

Towards the end of this reporting period, the Health Board, along with all other public, private and voluntary organisations faced an unprecedented challenge in the outbreak of the COVID-19 virus. During this time, we were very much conscious of the importance of partnership working and ensuring fair and equitable access to services and treatment across our communities.

Strong links with public sector, voluntary and third sector partners, already established through existing Partnership Boards were used to ensure that information was shared accurately and in a timely manner. From the early stages, information on Covid-19 was made available in multiple languages on our public facing internet website and through social media. An Ethics Panel was also established, chaired by the Medical Director and includes representation from the corporate Diversity and Inclusion Team.

The Health Board recognised that capacity to provide face-to-face interpretation would be affected by interpreters who were symptomatic, self-isolating and social distancing. To address this risk, the planned commissioning of an online interpretation service for all Health Board services was brought forward to facilitate access to services for BSL users and those who do not speak English or Welsh as a first language.

There remains much to learn about the immediate and long-term effects of Covid-19. The Health Board will review new and emerging evidence such as the health impact assessment of Covid-19 policy (Public Health Wales, 2020) against the current equality objectives to ensure they continue to focus on addressing the inequalities.





Our Strategic Equality Plan Objectives

Workforce Information

Workforce information included in this report has been summarised from our Workforce Equality Annual Report 2019-20 which is published separately. This section outlines comparisons between workforce data published as at 31 March 2020 against data published at 31 March 2019. It should be noted that disability, ethnicity, religious belief and sexual orientation are self-reported categories on the Electronic Staff Record and therefore the data may not fully reflect the demographic profile of the workforce.

The most recently available 2011 Census information (as condensed in Appendix 1) has also been highlighted. Where possible, comparisons are drawn between the March 2020 workforce data although the Census information reports for people of all ages.

Age Profile

The 2011 Census identified between 60-63% of the population across the three counties being of working age. The majority of the workforce as at 31 March 2020 were aged between 25–59 (approximately 84%). Compared to 2019, workforce information data on 31 March 2020 showed:

- The percentage of staff identifying within the Age Profile for the ages of 54 and below has decreased by 0.26%.
- Age Profiles for the ages of 55 and above have shown a percentage increase of 0.26%.

Disability

At 31 March 2020, the Health Board employed 310 staff who identified as Disabled, which accounted for 2.68% of our workforce. Based on 2011 Census data for Carmarthenshire, out of 100 people 38 (38%) of the population declared a limiting long-term illness or disability. In Ceredigion 28 out of 100 people (21%) and in Pembrokeshire 11 out of 100 people (11%). Whilst workforce data reflects those of working age, it is important to note that Census data captures people of all ages.

Compared to 2019, workforce information data on 31 March 2020 showed:

- The percentage of staff identifying as Not Disabled has increased by 4.59%.
- The percentage of staff identifying as having a Disability has increased by 1.01%.
- The percentage of staff not disclosing or not declaring this information Not Disclosed / Not Declared has fallen by 0.39% and Unknown / Unspecified has fallen by 5.23%.

Ethnicity

At 31 March 2020, the Health Board employed 777 staff who identified their ethnic group as Black, Asian or Mixed ethnicity and this accounted for 6.71% of our workforce. Based on 2011 Census data for Carmarthenshire, Ceredigion and Pembrokeshire, 2% of the population identified as being from a non-white background.

Compared to 2019, workforce information data on 31st March 2020 showed:

- The percentage of staff identifying as White has risen by 1.98%.
- The percentage of staff identifying as Black or Black British has increased by 0.23%.
- The percentage of staff identifying as Asian or Asian British has decreased by 0.23%.
- The percentage of staff identifying as having Mixed ethnicity has decreased by 0.01%.

- The percentage of staff identifying as from Any Other Ethnic Group has decreased by 0.04%.
- The percentage of Unknown (2018/19) / Not Stated (2019/20) has decreased by 1.93%.

Gender

At 31 March 2020, the Health Board employed 11,586 staff. 77.7% identified as female and 22.3% identified as male. Census data for 2011 showed the following male/female percentages: Carmarthenshire – 49% male, 51% female; Ceredigion - 50% male, 50% female; and Pembrokeshire - 49% male, 51% female. The staff demographic for the NHS is predominantly female, and figures for the Health Board reflect this. Compared to 2019, workforce information data on 31 March 2020 showed:

- The percentage of employees identifying as Male has increased by 0.19%.
- The percentage of staff identifying as Female has decreased by 0.19%.

Gender Reassignment

Statistics on gender reassignment were not collected as part of the 2011 Census information and are not currently collected on the Health Board's Electronic Staff Record system.

Marital Status

No information on marital status was collected during the 2011 Census. Compared to 2019, workforce information data on 31 March 2020 showed:

- The percentage of staff detailing marital status information has increased by 0.58%.
- The percentage Unknown has decreased by 0.58% for the period.

Maternity & Adoption

No pregnancy and maternity data was collected in the 2011 Census. Compared to 2019, workforce information data on 31 March 2020 showed:

• The percentage of employees on leave due to Maternity and Adoption has increased by 0.05%.

Religious Beliefs

According to the 2011 Census, around 60% of the population are Christian, 2% would be of other religion, around 30% would have no religion and 9% would prefer not to state their religion. Compared to the March 2020 workforce profile of Hywel Dda, around 40% are Christian, 10% would be of other religion, 20% chose not to disclose and 11% are Atheists. The remaining workforce have not recorded a religious belief on ESR.

Compared to 2019, workforce information data on 31 March 2020 showed:

- The percentage of staff identifying as having a specific religion or belief has increased by 3.90%.
- The percentage of staff identifying as having other religious belief has increased by 0.81%.
- The percentage of staff choosing not to disclose this information has decreased by 0.21% and Unknown / Unspecified has decreased by 4.49%.

Sexual Orientation

At 31 March 2020, the Health Board employed 180 staff who identified as Gay or Lesbian/ Undecided/ Bisexual which accounted for 1.55% of our workforce. Based on data published by Stonewall Cymru between 6% and 9% of the population would identify as Lesbian, Gay or Bisexual.

Compared to 2019, workforce information data on 31 March 2020 showed:

- the percentage of staff identifying as Bisexual has increased by 0.11%.
- The percentage of staff identifying as Gay or Lesbian has increased by 0.24%.
- The percentage of staff identifying as Heterosexual or Straight has increased by 4.98%.
- The percentage of staff choosing not to disclose this information has decreased by 0.91% and Unknown / Unspecified has decreased by 4.46%.





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Equality Impact Assessment

During April 2019–March 2020, the Health Board has undertaken 145 Equality Impact Assessments (EqIA). Whilst there were no major service change EqIA's fully completed during the period of this report, 14 were either directly or indirectly associated with service change. Some EqIAs were ongoing as they are live documents and updated as new information emerges. For example, the EqIA for the Llanelli Twilight Sanctuary identified an issue in relation to the provision of British Sign Language (BSL) interpretation services and action to mitigate this is currently still under discussion.

Below are some examples taken from Guidelines and Policies, some of which are published on the Health Board's internet site and all of which may be requested by a member of the public. The examples illustrate how even small positive changes can make a big difference to patient experience and outcomes.

Bladder Scanning Guidelines

The EqIA identified the importance of ensuring that staff are aware of particular issues relating to confidentiality, medical records and the sex and/or gender identification of individuals when conducting the procedure. This is particularly relevant to patients who may be considering, are undergoing or who have undergone gender reassignment. Also, in these cases, the importance of the appropriate sharing of information on whether or not surgical intervention has been undertaken and to what degree. As a result of the EqIA paragraph 5.1 - Policy Specific Confidentiality Considerations – was added to the Bladder Scanning Guidelines. This change guides staff to act in a way which preserves safety, confidentiality and dignity for the patient, particularly Trans patients who may or may not have undergone surgical intervention.

Enhanced Patient Management and Support Policy

The EqIA highlighted the need for people with sensory loss to be included as a distinct group of patients being at increased risk of for example, falls, dehydration and potential malnutrition during long hospital stays. It also highlighted that communication difficulties may lead to misunderstandings from both patient and clinician point of view resulting in potential inappropriate medication or treatment. In response to these findings the Welsh Levels of Care Document was used and illustrative examples of where patients may require enhanced support under these circumstances were added to the Policy. An additional paragraph was also added to alert staff to the necessity to identify and meet the particular needs of individuals, highlighting that a proportion of people will have some form of sensory impairment (such as sight loss, hearing loss or both) and emphasising that ineffective communication is a patient safety issue and can result in poorer health outcomes. The changes made to the Policy will help to reduce the risk of adverse incidents for patients with sensory loss.

Surrogacy Guidelines

Contents

The EqIA identified the use of non-inclusive terminology and as a result the title of the Guidelines was changed from "Care of Women Involved in Surrogacy Guidelines" to "Management of Surrogacy Pregnancies Guidelines". The phrase "pregnant surrogate women" was changed to "surrogate" throughout the document. The introduction was also changed to include explicit reference to same sex couples and to include a specific directive that surrogates and intended parents should be treated in the same way as other patients accessing healthcare during pregnancy and birth, whilst recognising that there may be particular characteristics, such as LGBT+ status that may require a more tailored approach. The action taken will ensure LGBT+ individuals are recognised and afforded an equally high standard of care and treatment in accordance with their particular needs.

The Health Board is committed to conducting appropriate equality impact assessments, closely linked with our commitment towards continuous engagement.

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Looking Forward to 2020-2024

Following a joint multi-agency public engagement exercise to review our equality objectives for 2020-2024, we published our <u>Strategic Equality Plan and Objectives 2020–2024</u> in April 2020. Within this, we outline our refreshed objectives and set out our intended direction of travel over the next four years to advance equality, eliminate discrimination and foster good relations between those who share a protected characteristic and those who do not. Our plan relates to our role as an employer, as well as the way in which we provide services to patients, families, Carers and our wider population.

During the unprecedented events resulting from the emergence and spread of Covid-19 towards the end of this reporting year, we were able to consolidate the working relationships we have been building with our partner organisations, including a variety of third sector and voluntary organisations. We will continue to strengthen these bonds in order to help us deliver services to our communities in ways that meet the needs of our communities across all protected groups.

There is no doubt that we will emerge from the pandemic having established new and innovative ways of working, that may, at any other time, have taken far longer to introduce. We will have learned valuable lessons about the needs of different groups accessing our services, how they may be affected differently from the general population, and what we need to do to ensure that they receive equitable care and treatment and preserve their dignity. Lessons learned in the hardest of circumstances are often the ones that

have the most impact and the most long lasting effects. We intend to turn these lessons into positive action to help reduce health inequalities and make our workplaces, and services, safe, sustainable, accessible and kind for all.

Our organisation's values are integral to what we do every single day – putting people at the heart of everything we do, working together to be the best we can be and striving to deliver and develop excellent services. We were able to put these values into practice more than ever during the past year and we will continue to do so during the coming year, working together with our partners and our communities.

