



**Western Health
and Social Care Trust**

**Equality Action Plan
and Disability Action Plan**

Local Actions

2018 - 2023

Alternative Formats

This document can be made available, on request, in a range of alternative formats including:

- Large font
- Audiocassette
- Braille
- Computer Disc
- Main minority ethnic languages
- DAISY
- Easy-read
- Electronic version

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**Western Health and Social Care Trust Local Actions
to support Health and Social Care Equality Action Plans
and Disability Action Plans for 2018 - 2023**

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1. Introduction

The stated aim of the Western Health and Social Care Trust is:

“to provide high quality, people-centred services through highly valued and engaged staff”.

This aim is supported by the following 6 ‘core values’:

- **Excellence:** we are committed to high quality, safety and accountability in our services to individuals, families and communities.
- **Commitment:** we strive for working environments which promote growth, learning and development, teamwork, pride, creativity, loyalty and trust.
- **Integrity:** we believe integrity is the foundation for individual and corporate actions. We adhere to the values of honesty, openness and respect for all.
- **Equality:** We promote equality and fairness for all.
- **Partnerships:** We are committed to working in collaboration with service users, communities, policy makers, commissioners, trades unions and other service providers and to making co-production and co-design the basis for our service planning and delivery.
- **Efficiency:** We will ensure our resources are used as efficiently and effectively as possible.

Our Shared Purpose

- We will deliver best outcomes;
- People will experience safe, compassionate and high quality care;
- Collaboration will be how we work;
- People will be proud to work for us;
- We will be a learning organisation.

The Trust’s ‘core values’, as above, will underpin all that we do.

This document outlines the Western Health and Social Care Trust’s (WHSCT) Local Actions 2018 - 2023, which are to be read in conjunction with the Health and Social Care (HSC) Trusts’ Regional Equality Action Plan 2018 – 2023 and Disability Action Plan 2018 – 2023.

It sets out the actions that we plan to take to promote our Section 75 equality duties, as well how the Trust proposes to fulfil the ‘Disability Duties’ – *to promote positive attitudes towards disabled people; and encourage participation by disabled people in public life* – in relation to its functions.

These actions will be implemented through the framework of the Trust's Equality Scheme which sets out how the Trust proposes to fulfil the Section 75 statutory equality duties to *promote equality of opportunity and good relations*, including the commitment to produce an Equality Action Plan.

2. Western Health and Social Care Trust (WH SCT) Equality Action Plan and Disability Action Plan Local Actions 2018 - 2023

The WH SCT Local Actions were developed as a result of the Western Trust's Pre-Consultation event held on 20 January 2017. A regional consultation workshop was also held in January 2017. In addition to this, all 5 HSC Trusts and the Northern Ireland Ambulance Service Trust consulted collaboratively with an extensive range of stakeholders on the regional Equality Action Plan and Disability Action Plan and their respective Local Plans/Actions.

A Consultation Outcome Report detailing the consultation process, together with feedback received, can be found on the Trusts' websites or by contacting the Head of Equality & Involvement (see page 3 for contact details).

At a regional level all HSC organisations worked collaboratively to gather emerging themes in relation to key inequalities experienced by the 9 equality categories. Actions and priorities within the regional and local Plans have been informed by this audit of inequalities.

The following table outlines our Local Actions for the next 5 years. These action measures are designed to be flexible, adaptable and responsive to changing circumstances and needs and will be reviewed on an ongoing basis and annually via the Trust's Annual Equality Progress Report to the Equality Commission for Northern Ireland.

3. How the Plans/Local Actions will be published

The Regional HSC Equality Action Plan (EAP), Disability Action Plan (DAP) and Western Health and Social Care Trust EAP and DAP Local Actions will be placed on the Trust's website and intranet and will be available from the Trust's Head of Equality & Involvement (see page 3 for contact details).

These documents will also be made available, on request, in alternative formats (see page 3).

4. Acknowledgements

We would like to thank all those who participated in the development of our Local Actions 2018 – 2023, those who participated in the Pre-Consultation Event in January 2017 and those who responded during the public consultation period. Your contributions are much appreciated and valued and have helped shape our final Local Actions.

Western Health and Social Care Trust (WHSCT) LOCAL ACTIONS 2018-2023

To support Health and Social Care (HSC) Equality Action Plan (2018 – 2023) and Disability Action Plan (2018 – 2023)

The actions below are specific to the Western Health and Social Care Trust. They are to be read in conjunction with the HSC Trusts’ Equality Action Plan (2018-2023) and Disability Action Plan (2018-2023). The local actions were developed as a result of the Trust’s Pre-Consultation event held on 20 January 2017.

This Plan is set the following sections:

- **Section 1: Ensuring the Effective Discharge of our S75 Equality Duties**
- **Section 2: Promoting Equality in our Services**
- **Section 3: Supporting our Staff**

Key: S75 refers to the 9 Section 75 Groups which are: Gender, Age, Religion, Political Opinion, Marital Status, Dependent Status, Disability, Ethnicity and Sexual Orientation.

SECTION 1: Ensuring the Effective Discharge of our S75 Equality Duties

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale and Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
<p>ACTION 1 Accessibility of Appointment Processes</p> <p>To make the appointment process for people with sensory and visual impairment more accessible e.g. changes to letter and patient</p>	Trust Directorates to work in partnership with RNIB and Action on Hearing Loss to develop models of good practice. Roll out learning to other service areas.	<p>Develop appointment letters in accessible formats. Identify how people want to have information provided etc.</p> <p>Establish a Task and Finish Group with key HSC managers and relevant stakeholders through the Trust’s</p>	<p>Improved communication in suitable formats to meet the needs of people with a visual/hearing impairment using services.</p> <p>Improved patient satisfaction with communications</p>	To be completed by end of 2018	Assistant Director, Performance and Service Improvement Directorate

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale and Description of Monitoring Arrangements	Lead Person
		Output	Outcome/Impact (For S75 Groups)		
information to be provided in suitable formats.		Disability Steering Group.	from the Trust.		
<p>ACTION 2 Improvements in Wayfinding across Western Trust Facilities</p> <p>Undertake an audit of existing wayfinding and implement improvements in wayfinding based on good practice and Disability Discrimination Act (DDA) duties within Trust facilities.</p>	Trust Directorates to work in partnership with key stakeholders and service users to develop models of good practice and undertake improvements in wayfinding in Trust facilities.	<p>Assess current signage and wayfinding to identify areas for improvement.</p> <p>Establish a Working Group with key Trust staff, service users and voluntary and community groups to oversee the project and to review changes implemented to establish improvements (via independent checks/verifications).</p>	Improved hospital/Trust facilities user satisfaction and reduced complaints.	To be completed by end of 2018	Assistant Director, Performance and Service Improvement Directorate
<p>ACTION 3 Improved Communication for Patients and Public</p> <p>Work to improve the level and quality of information provided to patients in a range of suitable alternative formats.</p>	Trust Directorates to work in partnership with key stakeholder groups including Voluntary and Community sector staff and the public to review and improve letters, leaflets and booklets provided to patients.	Undertake a review of and letters, leaflets and booklets, in particular of those used most frequently to improve the level and quality of information provided in a wider range of suitable alternative formats.	Clearer, more effective information. Improved hospital/Trust facilities user satisfaction and reduced complaints.	To be completed by end of 2019	All Trust Directorates

SECTION 2: Promoting Equality in our Services

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale and Description of Monitoring Arrangements	Lead Responsibility
		Output	Outcome/Impact (For S75 Groups)		
<p>ACTION 4 To ensure Equality of Service</p> <p>Source: Equality Commission for Northern Ireland (ECNI)</p>	Directorates to ensure that when they are delivering their services they work to support all Section 75 (S75) groups to encourage their participation.	Directorates to review uptake of services by all S75 groups to ensure that they are targeting appropriate individuals/ groups e.g. screening/tests provided on age/sex specific grounds are not applicable.	Increased capacity of Directorates to identify low uptake by any of the equality groups and to develop actions that address this.	Over the lifespan of the Plan	All Trust Directorates
<p>ACTION 5 Commitment to ensure PPI is integral to design and evaluation of Trust services</p> <p>Sources:</p> <ul style="list-style-type: none"> • Public Health Agency (PHA) PPI Standards • WHSCT Equality Screening Forms 	Develop a range of involvement opportunities for service users, carers and the public.	Active and effective involvement of service users, carers and the public within the Western Trust.	People are more involved and are consulted on decisions that affect their health and social care. Increased satisfaction and reduced complaints.	Over the lifespan of the Plan	All Trust Directorates

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale and Description of Monitoring Arrangements	Lead Responsibility
		Output	Outcome/Impact (For S75 Groups)		
<p>ACTION 6 To ensure the involvement of S75 groups in the design and development of new hospital premises and service developments</p> <p>Source: WHSCT Pre-Consultation for Disability Action Plan</p>	Continue to involve S75 groups in the planning of new and reconfigured facilities.	Maintain community forums. Maintain representation from Trust Directorates, key stakeholders, Community & Voluntary sector and, as required, specific representative/ interested groups.	<p>Better facilities that meet the needs of people with disabilities and other Section 75 groups.</p> <p>Issues raised on the fora are used to inform Trust Strategic Capital Developments.</p>	Ongoing over the lifespan of the Plan	Assistant Director, Strategic Capital Development (SCD) Directorate
<p>ACTION 7 Work to develop criteria in the tender processes that will not exclude local providers, in line with Department of Finance and Personnel (DFP) and DHSSPS sustainability guidance</p> <p>Source: WHSCT Pre-Consultation for Equality Action Plan</p>	Social and Economic Regeneration Plan (SERP).	Provision of skills training and placement opportunities; tackling social exclusion and long term unemployment. Supply chain opportunities for social enterprise, micro organisation and Small and Medium Sized Enterprises (SMEs).	The creation of social and economic opportunities throughout the life of new capital developments.	Ongoing over the lifespan of the Plan	Assistant Director, Strategic Capital Development (SCD) Directorate

SECTION 3: Supporting our Staff

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale and Description of Monitoring Arrangements	Lead Responsibility
		Output	Outcome/Impact (For S75 Groups)		
<p>ACTION 8 Improved uptake of Family Friendly Policies by Trust staff</p> <p>To support improvements in the number of staff availing of Family Friendly policies.</p> <p>Source: Internal Assessment/WHSC Workforce Strategy 2016-2021</p>	<p>Review of uptake of Family Friendly policies. To be better informed of uptake of Family Friendly policies across the S75 categories.</p>	<p>High level analysis and monitoring of uptake of Family Friendly policies including community background taken from updated HRPTS and Equal Opportunities data.</p> <p>Analysis of issues arising from staff as a result of applications for flexible working having been declined.</p> <p>Review of Family Friendly policies to include support for staff as part of working longer strategy.</p>	<p>Increased uptake of Family Friendly policies.</p> <p>Increased awareness by managers of the application of Family Friendly policies.</p> <p>Increase in staff awareness of the policies – identify through staff survey results.</p>	<p>Ongoing over the lifespan of the Plan</p> <p>Monitor via: Staff survey results; HRPTS information</p>	<p>Assistant Director, Human Resources Directorate</p>
<p>ACTION 9 Supporting feedback, comments and complaints</p> <p>Source: WHSCT Pre-Consultation for Equality Action Plan and Disability Action Plan</p>	<p>Promote the Trust Complaints Processes. Work with service users and staff to support improvements in capturing issues/data.</p>	<p>Improved service through the active and effective involvement of Trust staff in partnership with service users, carers and the public in improving services.</p>	<p>Increased service. Awareness of issues with services.</p>	<p>Ongoing over the lifespan of the Plan</p> <p>Feedback including via 10,000 Voices Project</p>	<p>Primary Care and Older Peoples Directorate: Patient Client Experience Lead</p> <p>Medical Directorate: Complaints Manager</p>

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale and Description of Monitoring Arrangements	Lead Responsibility
		Output	Outcome/Impact (For S75 Groups)		
<p>ACTION 10 To improve the uptake of mandatory equality and human rights training across the Trust</p> <p>Source: Monitoring of Training Provision</p>	<p>Review training and ensure that S75 groups, who have highlighted staff attitudes as a particular issue are appropriately covered e.g. Lesbian, Gay, Bisexual and Transgender (LGBT) people, people with disabilities (including autism), people from minority communities and older people. Continue to work with S75 groups to develop and deliver training.</p> <p>Open up training to include participation from staff in organisations that have Service Level Agreements (SLAs) with the Trust/Co-operation and Working Together (CAWT) etc.</p>	<p>Promote use of mandatory Equality, Good Relations and Human Rights Training.</p> <p>Develop training plan to include staff working in organisations that have an SLA with the Trust.</p>	<p>Increased understanding of how to integrate equality and good relations considerations into everyday practice.</p> <p>Improved staff attitudes.</p> <p>Improved understanding of equality issues and legislation by staff in SLA organisations.</p>	Over the lifespan of the Plan	Head of Equality & Involvement, Performance and Service Improvement Directorate

Key Inequalities Identified and Source	Action Measure	Performance Indicator		Timescale and Description of Monitoring Arrangements	Lead Responsibility
		Output	Outcome/Impact (For S75 Groups)		
<p>ACTION 11 To better support HSC staff in their role with the assistance of Volunteers</p> <p>Source: Volunteer Manager</p>	<p>Appropriate Volunteer support agreed with clearly defined tasks as part of agreement with staff, volunteers and patients/carers.</p>	<p>Development of agreed Volunteer Role Description and relevant Training.</p>	<p>Increase in staff awareness of the role of Volunteers – identify through staff survey results of the impact of Volunteer Roles; - benefits to staff/patients/carers noted.</p>	<p>Over the lifespan of the Plan</p>	<p>Volunteer Manager, Primary Care and Older People's Services Directorate</p>
<p>ACTION 12 Improve uptake of Mandatory Training by HSC staff</p> <p>Source: Staff Side Representative Western Equality and Human Rights Forum (WEHRF) and Human Resources, WHSCT</p>	<p>Managers will support staff to complete all mandatory training. Managers will annually review uptake of mandatory training for their staff/staff teams</p> <p>Managers will promote completion of mandatory training in the first instance within working hours, as far as is reasonably practicable given the consideration of service needs.</p>	<p>90% Completion of all mandatory training within 6 months for new HSC staff</p> <p>80% Completion of all mandatory training within one year for existing HSC staff.</p>	<p>Trained HSC Staff.</p> <p>Training completed noted on Personal Development Plans for HSC staff (monitored via annual review meetings staff and line manager).</p>	<p>Over the lifespan of the Plan</p>	<p>Assistant Director, Human Resources Directorate</p> <p>All Managers within WHSCT</p>