

WOLVERHAMPTON CITY PRIMARY CARE TRUST

Meeting: 1 December 2009
Subject: PCT Equality & Diversity Annual Report
Report of: Director of Workforce

1. Purpose of report

- 1.1 To advise on progress of the implementation of PCT's Single Equality Scheme (SES).
- 1.2 To ensure the PCT fulfils its legislative requirement to produce an annual progress report under the Disability Discrimination Act (DDA) 2005, Disability Equality Duty, Race Relations Amendment Act (RRA) 2000 AND Gender Equality Duty (GED) 2006.

2. Recommendation

- 2.1 The Board is asked to note the progress made to date on the implementation of the plan.
- 2.2 To approve the detail contained within attached appendices for publication on the PCT's Intranet and Internet sites and a summary will be included within the 2010 PCT Annual Report.

3. Detail

- 3.1 The PCT published its first 3 year SES on October 2008 setting out a range of actions to be taken to comply with the RRA, DDA and GED. This report summarises the progress made during the period November 2008 – November 2009.
- 3.2 The PCT has continued to make progress on the SES; some of the key highlights are as follows:-
 - 3.2.1 Disability Standard Benchmarking Exercise. As a lead site for Positively Diverse the PCT qualifies as a member of the Employers' Forum on Disability (EFD), this organisation helps its members to employ people on the basis of their ability and achieve disability confidence. A report outlining the progress for the year 2008/09 is contained at Appendix 1.
 - 3.2.2 To review the SES action plans to ensure compliance with Standards for Better Health. Work is underway to agree action plans with Directors and to embed these within directorates and departments.

3.2.3 In relation to Equality Impact Assessment Implementation, 45 PCT managers have been trained in the period to ensure all our service and policy developments are fit for purpose in relation to Equality Legislation. This training has also been accessed by external NHS organisations who view this training as good practice.

3.2.4 Intercultural Awareness Training and Race Relations Amendment Act Training continues to be rolled out.

3.2.5 Equality Training continues for all employees on Recruitment and Selection training.

3.2.6 Development of Disability Leave policy. The policy has been drafted and is out for consultation and should provide a framework for leave relating to disability.

3.2.7 A report detailing progress on one of our key Race Equality issues is detailed at Appendix 2.

3.3 Gender Equality Actions

3.3.1 A significant area of activity has been in achievement of Single Sex Ward Status at Penn Hospital.

3.3.2 Also the PCT's Community Development Workers have been working with Mental Health staff on a number of projects involving several Asian Women's Groups in the City. Outcomes have included raising awareness of Mental Health issues among this community and to reduce the stigma, stereotypes and negative perceptions about Mental Health issues amongst this group. A breakdown of the work undertaken is identified in the table below.

Name of Project	Work with an Asian Women's Play Scheme
Aim	<ul style="list-style-type: none"> • To reduce the stigma and negative perception around mental health. • To engage young Asian Muslim girls in activities during summer. • Encourage their mothers to participate in workshops with their daughters and understand some of their needs. • Promote positive mental health. • Promote self esteem, empowerment and build on women's strength • Have an holistic approach to health and well being
Outcome	12 health promotion sessions were carried out
	<ul style="list-style-type: none"> • All girls have a better understanding of what mental health is; have better communication with their parents. The young girls planned and organised a health promotion evening where they could display and promote their work i.e. paint art, poetry, speeches.
Name of Project	Work with a South Asian Women's Group

Aim	<ul style="list-style-type: none"> • The aim of these sessions was to assist the group to interact and establish a relationship with each other. • explore and discuss the meaning of mental health and to highlight the difference in interpretation of what mental health means to their respected communities • Discuss Issue affecting women in society and implications it has on our mental health.
Outcome	8 Workshops carried out
	<ul style="list-style-type: none"> • The need for this group is that there is a place where they can get together and discuss issues affecting women in society and implications it has on their mental health. • They have a better understanding about mental health and what services are available. • The outcomes of this group report to BME Task group meeting and the Local Implementation Team (LIT).
Name of Project	Work with Asian Men's Group
Aim	<ul style="list-style-type: none"> • To deliver training and health promotion sessions to south Asian men.
Outcome	To develop a Asian men specific training pack
	<ul style="list-style-type: none"> • On going

4. Workforce Issues

The PCT currently employs over 2,700 employees. Monthly reports are produced for Directorates providing a detailed breakdown of workforce information including equality data. A quarterly equalities report is produced for Provider Board giving a more detailed breakdown. Discussions are taking place with the Commissioner to agree future workforce information requirements that will be needed to ensure it meets its equality duties from a commissioner perspective. Following a review of the Single Equality Scheme, it was identified that the PCT needed to analyse the Staff Opinion Survey data in relation to disability, ethnicity and gender. This analysis has now been completed and we will be using this information to identify key areas for development over the next 12 months. Detailed below is an analysis of our workforce from an equalities perspective.

4.1 Gender

81% of our workforce is female; this is consistent with the rest of the NHS. In relation to gender and part time working, Chart 1 identifies that half of the female workforce works part time. Chart 2 looks at the percentage spread of males and females across the Agenda for Change Bandings for provider services. It is interesting to note the higher male representation within the higher bandings.

4.2 Ethnicity

Chart 3 identifies the Percentage and numbers of BME staff within the PCT. As has been reported previously the number of 'not disclosed' has been

reduced over the last 12 months. However, we are now focusing our attention on positive action to increase the number of BME staff to ensure we reflect our community. However, Chart 4 does indicate that the number of BME starters has increased slightly over the last 6 months.

The PCT also has a legal requirement to ensure the numbers of BME staff are reflected proportionately through all Agenda for Change grades, Chart 5 identifies that we need to do more work in this area, particularly as the highest percentage of BME staff is within Band 2.

4.3 Disability

Chart 6 identifies the numbers of staff employed who consider themselves as being disabled, which is very low. However, this is not reflected by the information from our 2008 staff opinion survey which indicates that 35 of the staff who responded considered themselves as disabled.

4.4 Disciplinary

Chart 6 gives a breakdown of the ethnicity and gender of the numbers of disciplinary cases throughout the year that have gone to a formal hearing. The outcomes of those cases are regularly monitored to ensure the actions taken are appropriate and non-discriminatory.

4.5 Proposed Actions

We have recently analysed the results of our staff survey linked to key 'findings' (i.e. how motivated/valued staff feel) in relation to gender, ethnicity and disability and the areas where there are significant vacancies will be picked up and reflected as 'actions' in the workforce section of the PCT's Single Equality Scheme.

5. The Equality Diversity & Human Rights Committee

5.1 The first meeting of this Committee was held in November. As a formal sub-committee of the Board it now has the responsibility to ensure the PCT as both a Commissioner and a Provider meets its Equality & Diversity duties from both an employment and service user perspective. The Committee has identified a development programme to ensure the Single Equality Scheme reflects our Provider and Commissioner responsibilities.

5.2 The Committee has both PCT and external stakeholder members and will provide bi-monthly reports on progress against the Single Equality Scheme to the Trust Board.

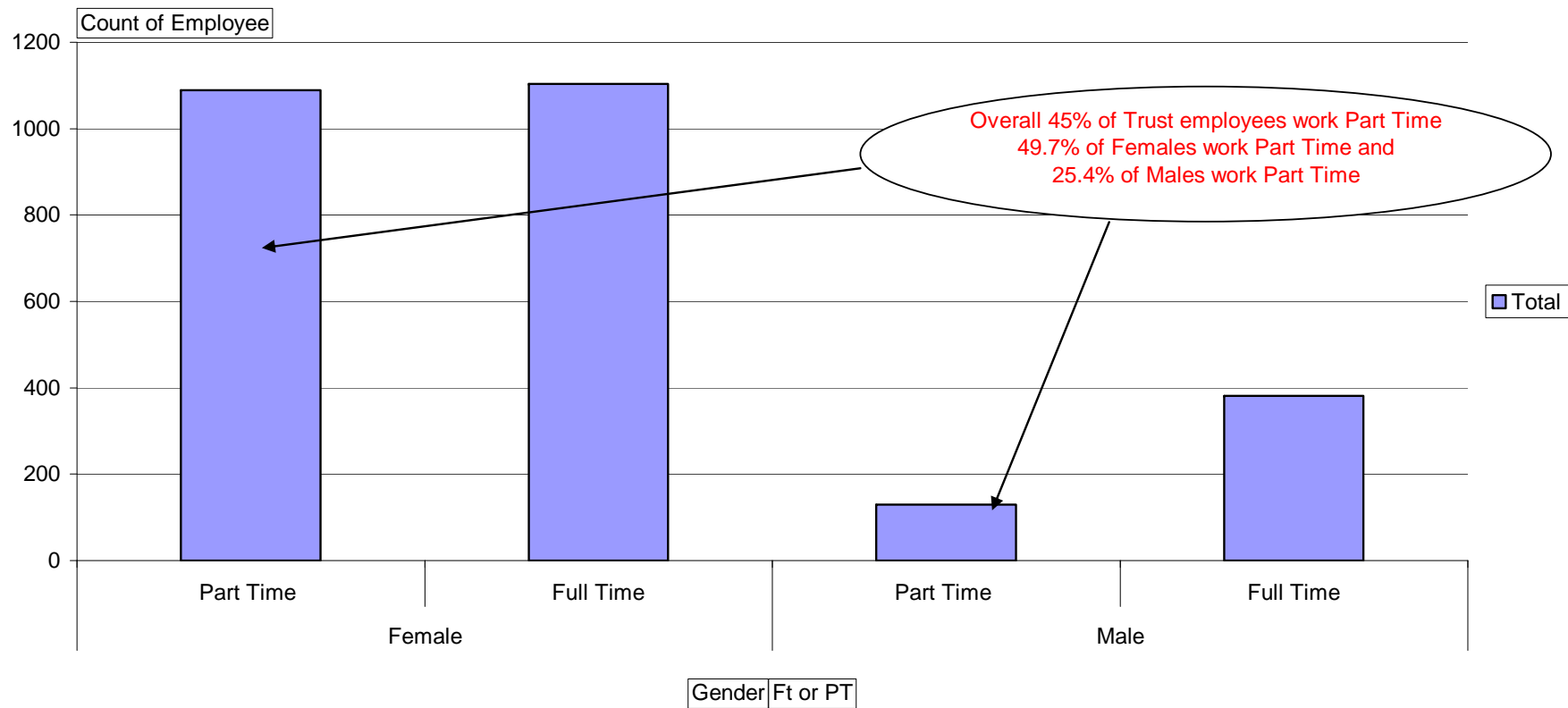
6. Key Risks

Failure to meet the requirements of the RRA, DDA and GED from both an employment and a service point of view could lead to the PCT being taken to an Employment Tribunal or to a Court of Law as a result of discrimination.

Chart 1

Month (All) Org L3 (All)

Wolverhampton City PCT
Workforce Monitoring
Equality and Diversity
The Trust
31st October 2009

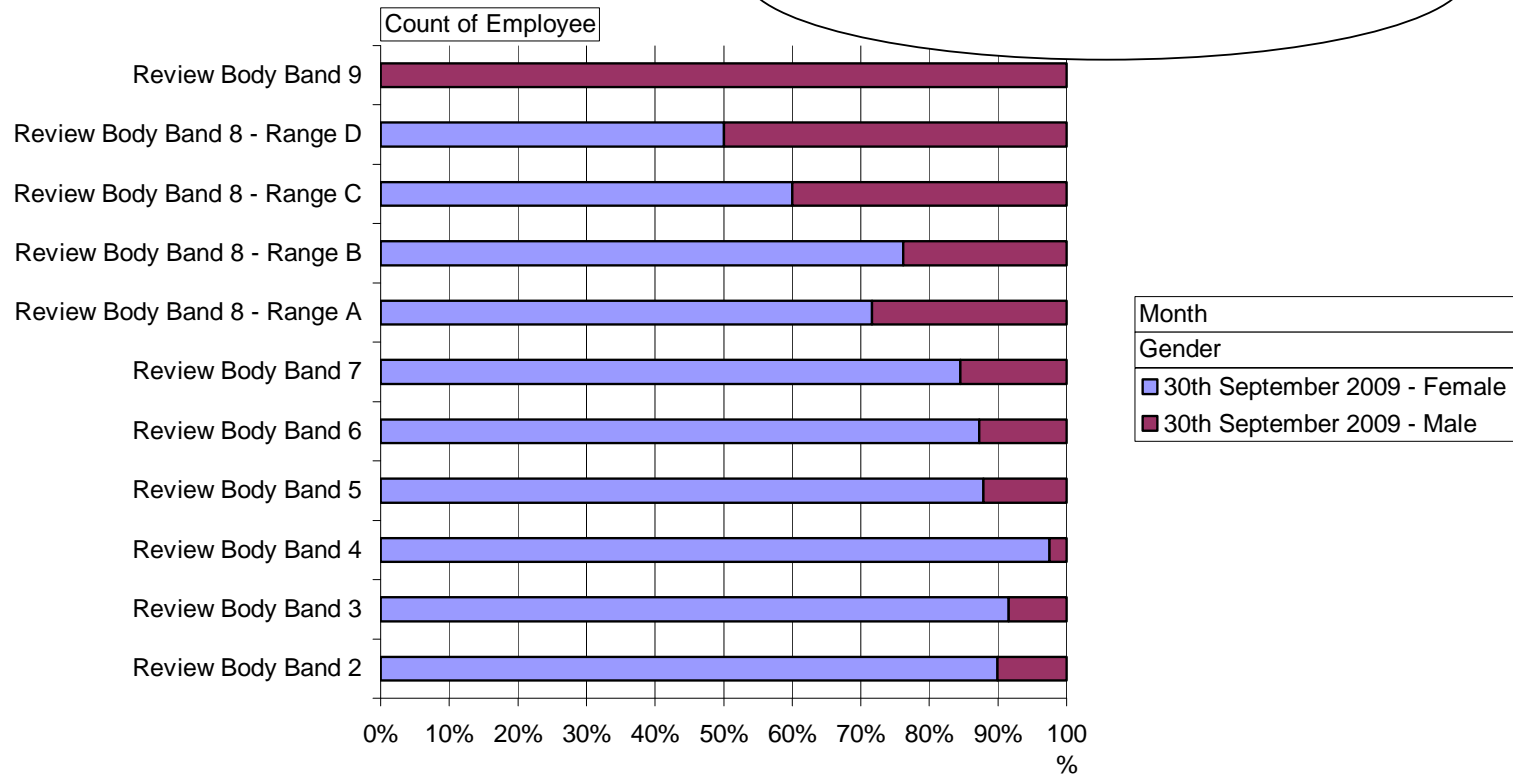


Org L3 (All)

**Wolverhampton City PCT
Workforce Monitoring
Equality and Diversity
Provider Services
31st October 2009**

Provider Services employs 12.0% Male staff.
Within Bands 8a and above
32.3% are Male

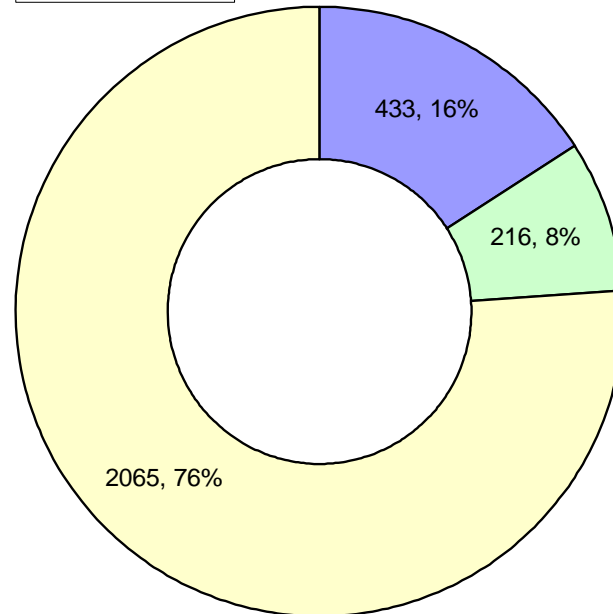
Payscale Description



Month (All)

**Wolverhampton City PCT
Workforce Monitoring
The Trust
31st October 2009**

Count of Employee

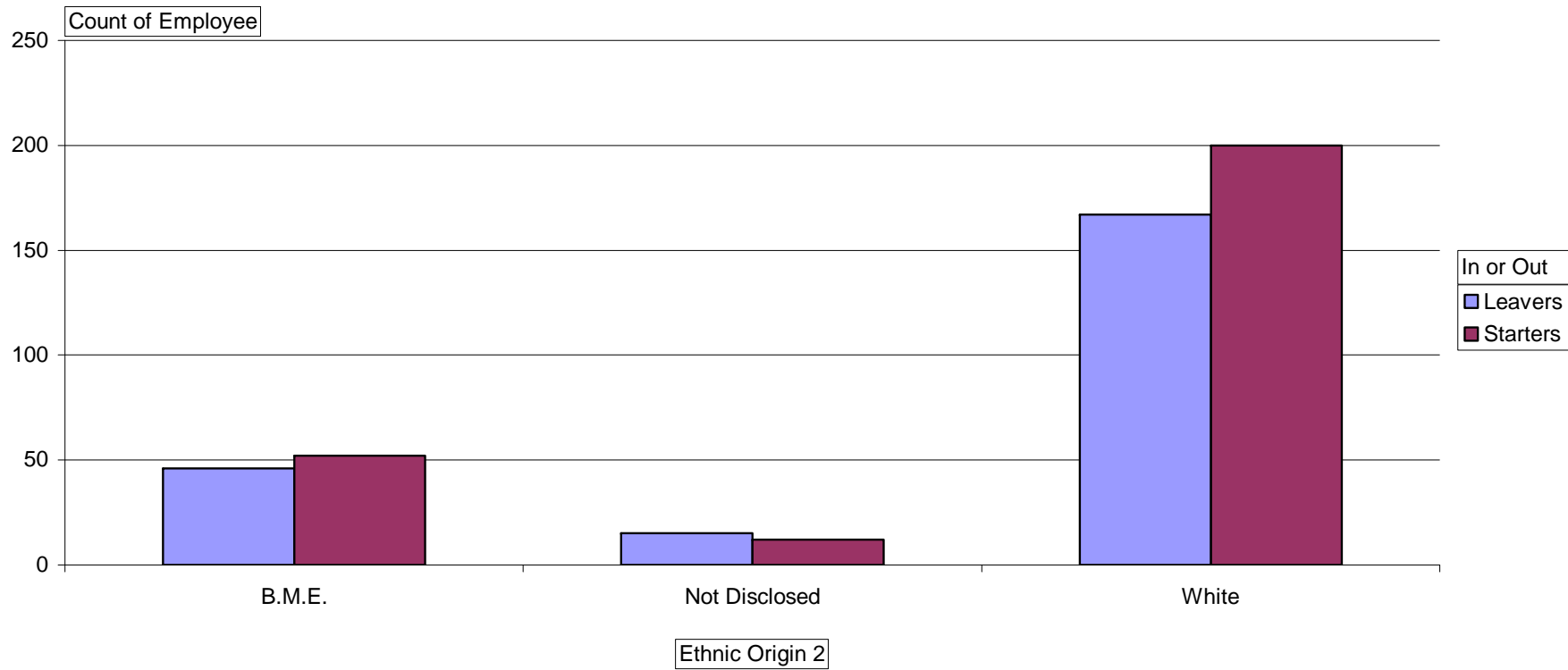


Ethnic Origin 2
■ B.M.E.
■ Not Disclosed
■ White

Chart 4

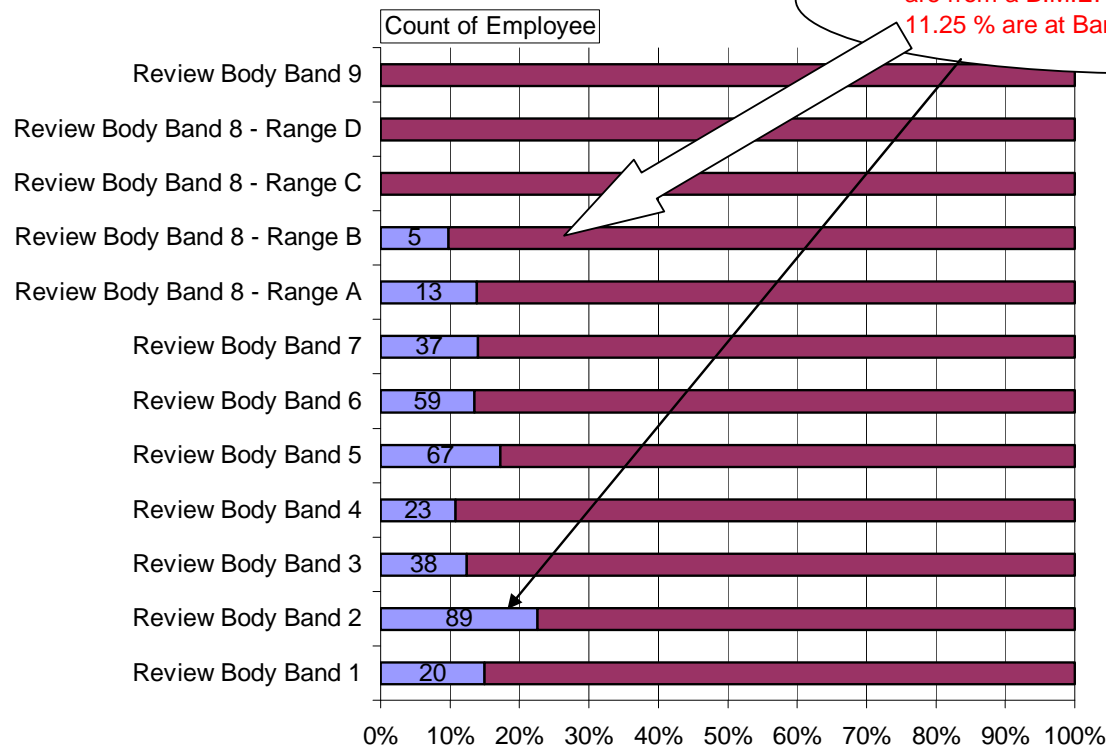
Month (All) Org L3 (All)

**Wolverhampton City PCT
Workforce Monitoring
Provider Services
Leavers and Starters By Ethnic Origin
During the year to October 2009**



Org L3 (All)

**Wolverhampton City PCT
Workforce Monitoring
Equality and Diversity
The Trust
31st October 2009**



22.5% of the staff that work within Band Two are from a B.M.E. background whilst only 11.25% are at Band 8a and above.

Payscale Description

Month
Ethnic Origin 2
30th September 2009 - B.M.E.
30th September 2009 - White

Chart 6

Org L3 (All)

**Wolverhampton City PCT
Workforce Monitoring
The Trust
31st October 2009**

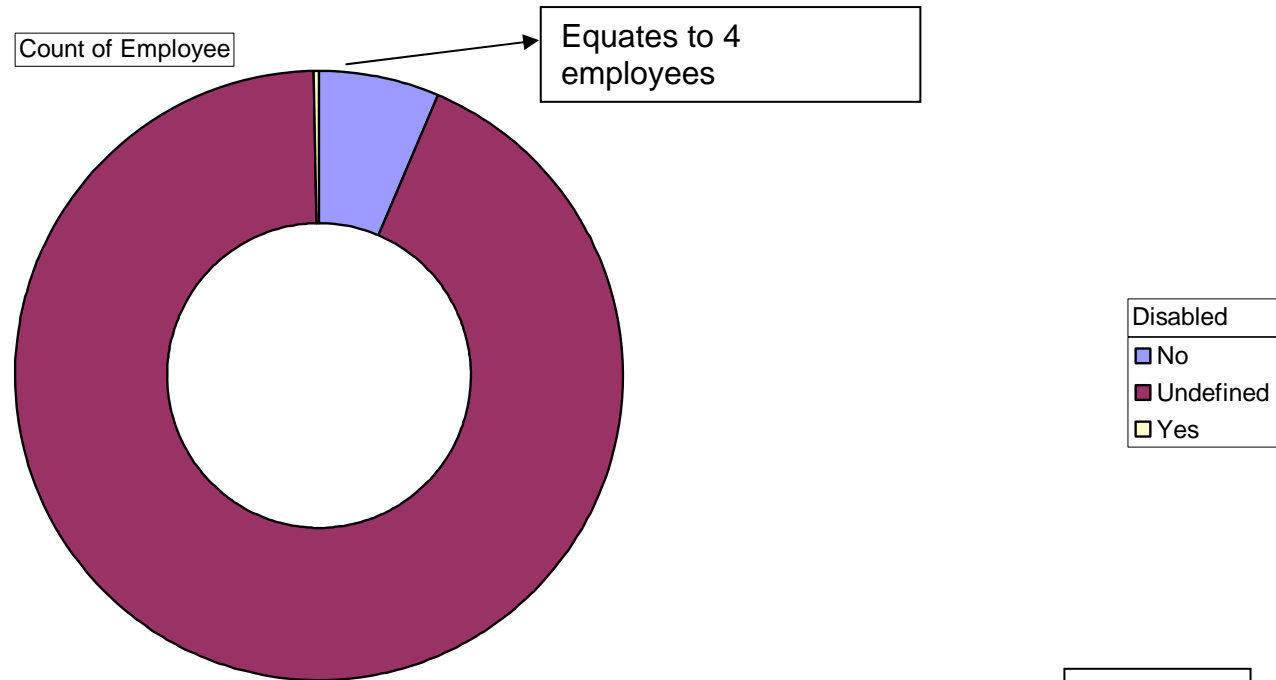


Chart 6

Month

**Wolverhampton City PCT
Number of Disciplinary**

**Broken down by Ethnicity and Gender
November 2008 - 2009**

Ethnic Origin	Female	Male	Grand Total
9 Not given	1	1	2
A White - British	10	3	13
C White - Any other White background	1		1
D Mixed - White & Black Caribbean	1		1
F Mixed - White & Asian		1	1
M Black or Black British - Caribbean	2	1	3
PD Black British	1		1
Grand Total	16	6	22

WOLVERHAMPTON CITY PRIMARY CARE TRUST

Meeting: 1 December 2009

Subject: Bi-Annual Disability Standard Benchmarking Exercise

Report of: Director of Workforce

1. Purpose of Report

To advise on the progress made in the PCT following the second Bi-Annual Disability Standard Benchmarking exercise.

2. Recommendations

2.1 To note the progress made to date.

2.2 To note the areas where further progress needs to be made.

3. Detail

3.1 As a lead site for Positively Diverse the PCT qualifies as a member of the Employers' Forum on Disability (EFD), this organisation helps its members to employ people on the basis of their ability, open up new markets, improve the quality of customer care, minimise legal and reputational risk and achieve disability confidence.

3.2 The PCT was one of 106 organisations who demonstrated their commitment to becoming disability confident in 2009 by taking part in the bi-annual Disability Standard Benchmarking Exercise.

3.3 The purpose of the disability benchmark is to assess where the PCT is now, where it needs to get to in relation to meeting its Disability Standards and how it will get there. The benchmark identifies priority actions as legal risk, best practice or quick win and interprets validated scores by comparing results with the benchmark average, sector average and where appropriate industry sector and previous Disability Standard performances. The PCT submitted nearly 200 pieces of evidence as part of the Benchmarking process.

3.4 The Disability Standard assessment is based on the 'Diversity Change Model', which consists of the following three sections:

- **Motivate:** encourage the organisation and its people to undertake action on disability.
- **Act:** take action in order to develop and value disability.
- **Impact:** assess the impact of action on disability and learn from this assessment in order to improve performance.

There are also a range of sub themes including; Building strong foundations, Recruitment and Selection, Training and development etc. A copy of the full report is available from the Equality & Diversity Team.

4 Comparison (2007 to 2009)

4.1 This table shows overall scores for comparison against the benchmark group as a whole as well as against industry sectors for 2007 and 2009.

	Average %							
	PCT 2007	PCT 2009	Benchmark 2007	Benchmark 2009	Public Sector 2007	Public Sector 2009	NHS Trusts Sector 2007	NHS Trusts Sector 2009
Motivate	58	89	63	72	67	77	64	75
Act	50	55	63	65	66	67	64	63
Impact	27	50	44	51	47	55	43	52
Total	45	65	57	63	60	66	57	63

4.2 The PCT's overall benchmark score is 65%. This is higher than the overall average score for all participants of the Disability Standard 2009, which is 63% and it has made significant improvement on its 2007 score.

4.3 **Strengths** : The PCT scored the highest on the Motivate section of the Assessment and across the Assessment scored highest on the Building strong foundations theme. The PCT scored 100% on Accessible built environment for customers and employees (an increase of 24%). The PCT increased its score in; Promotion by 39%, Appraisals, Training and Development increased by 28%, Recruitment and Selection increased by 10%.

4.4 **Areas for Improvement** : The PCT scored lowest on the Impact section of the Assessment and on the Employees theme. The report contained a series of recommendations including; implementing a communication strategy, anonymous disclosure of disabled employees on Staff Opinion Surveys and analyse the overall responses of disabled and non-disabled respondents to inform future policies and practices including appraisals to help identify any factors that may disadvantage disabled employees.

The areas for improvement will be incorporated into the PCT's Single Equality Scheme.

5. Key Risks

Failure to meet our legal requirements under current legislation in employment could lead to the PCT being taken to an Employment Tribunal or to Court as a result of discrimination. It could also lead to a breach in failing to provide equal access to goods, facilities and services.