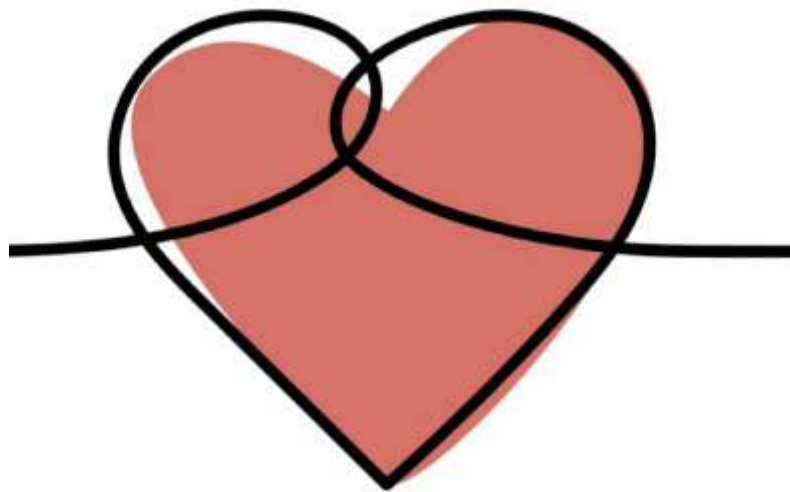


# UHNM Equality, Diversity & Inclusion Annual Report 2022-23



We are  
**compassionate**  
and **inclusive**





## Legal Requirements

### The Equality Act 2010:

This places key duties on statutory organisations that provide public services. It protects people from unfavourable treatment and discrimination and refers to people with the following protected characteristics:

Age	Disability	Sex
Sexual Orientation	Gender Reassignment	Race
Religion or Belief	Pregnancy and Maternity	Marriage and Civil Partnership

### How we show due regard to the Public Sector Equality Duty

In addition to the Equality Act, The Public Sector Equality Duty (PSED) requires public bodies to have due regard to the need to eliminate discrimination, advance equality of opportunity and foster good relations between different people when carrying out their activities. Assurance is provided to our Trust Board via the following equality, diversity and inclusion frameworks:

- Workforce Race Equality Standard
- Workforce Disability Equality Standard
- Gender Pay Gap
- Accessible Information Standard
- Equality Delivery System (EDS)
- Disability Confident
- Rainbow Badge Accreditation Scheme

We report on the Trusts position relating to the Gender Pay Gap, Workforce Race Equality Standard and Workforce Disability Standard and publish these reports with our Action Plans on our Equality and Diversity page on the [Trust Website](#).





## Consultation and involvement of staff and service users

We are committed to ensuring that our staff and service users are involved in shaping our equality, diversity and inclusion work and have opportunities to influence and contribute. We do this through our staff diversity networks and our patient user groups.

We know that by working in partnership with patients, carers, community organisations and our staff that we can develop services that meet local need and a workplace that enables all our employees to thrive.

## Equality Monitoring

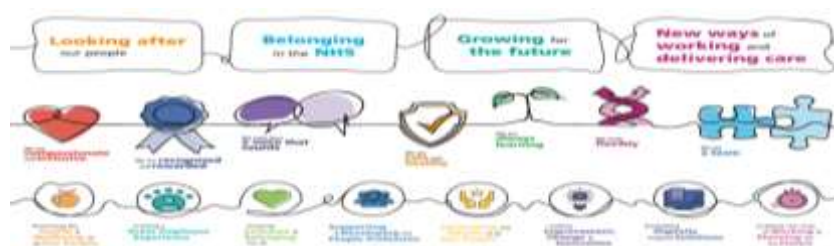
Good quality data enables us to identify priorities and measure our effectiveness. We recognise that the data collection of protected characteristics for both staff and patients' needs to be further improved in order for us to fully understand who is using our services and the needs of our workforce. We will continue to actively encourage our workforce and patients to share this information.

## Equality Impact Assessment

All public bodies have a statutory duty to set out arrangements to assess and consult on how their policies and functions impact on equality. At UHNM this has been applied to assessments on all our policies, guidelines and practices that impact on protected characteristics. We have a well-established pathway for the approval of procedures and policies which include the review of Equality Impact Assessments and Action Plans (where applicable). A Quality Impact Assessment similarly reviews impacts of significant changes to services we provide.

## NHS People Plan

More people, working differently, in a compassionate and inclusive culture. This is the clear ambition of the NHS People Plan, the workforce strategy for delivering the [Long Term Plan for the NHS](#) it states "The NHS must welcome all, with a culture of belonging and trust. We must understand, encourage and celebrate diversity in all its forms. Discrimination, violence and bullying have no place. If we do not role model this culture, then how can our patients expect to be treated equitably, and as individuals?"





## The NHS Standard Contract

Section 13 Equity of Access, Equality and Non-Discrimination outlines the standards and requirements that must be adhered to ensure NHS services promote equality and address health inequalities.

## Our UHNM Equality Objectives

We have made good progress against the priorities we set out in our EDI Strategy 2022-25; and this progress is detailed over the following pages. Our ambition is to make UHNM a great place to work for everyone. We recognise that we must give our colleagues a powerful reason to stay and grow within the organisation, and this comes from a sense of belonging - a key element of the NHS People Plan is one of our ambitions. We also know that this enables us to provide the best possible care for our patients and service users and to get the best possible health outcomes.

### Our Equality, Diversity and Inclusion Strategy Priorities

- 1 Inclusive Patient Feedback**  
Listen to and act on the lived experiences of our patients
- 2 Inclusive Patient Access**  
Ensure Equality Impact Assessment is a robust process that offers both assurance and opportunities for improvement that address inequalities in access to services
- 3 Inclusive Patient Involvement**  
Patients and Services Users will be actively involved in service design and governance structures with increased feedback from hard to reach groups
- 4 Listen to, Understand and Learn from the Experience of all Staff**  
To promote diversity and encourage inclusion at all levels throughout the Trust, particularly promoting diversity at Board level
- 5 Respect and Value**  
Respect and value all colleagues and their contribution and have a strategic focus on civility and respect
- 6 Develop a Culture of Inclusive and Compassionate Leadership**  
Continue to build, strengthen and develop initiatives focused on staff experience, wellbeing and engagement and culture and leadership development
- 7 Recruitment, Training and Promotion**  
Ensuring that people are recruited, trained and promoted according to their abilities and in the proportions one would expect for the populations represented





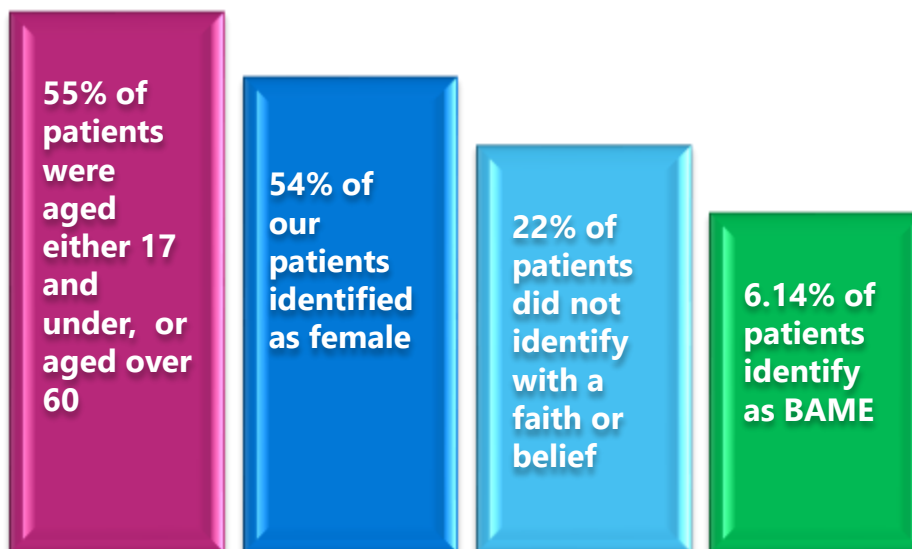
## OUR PATIENTS AND SERVICE USERS

### Patient Equality, Diversity and Inclusion

Our UHNM EDI Strategy was developed with service users via our Hospital User Group, who helped in creating our patient experience EDI priorities. We have set ourselves 3 equality objectives for the next 3 years:

1. Listen to and act on the lived experiences of our patients
2. Ensure Equality Impact Assessment is a robust process that offers both assurance and opportunities for improvement that address inequalities to access to services
3. Patients and service users will be actively involved in service design and governance structures with increased feedback from hard to reach groups

### UHNM Patient Profile



### Listen to, and act on the lived experience of our patients

#### Patient Leaders

UHNM Patient Leaders, whose main role is to represent the voice and views of patients at all levels throughout the trust have been involved in a number of projects during 2022/2023 to support our patient voices being heard. These projects included ensuring bendy straws are available to support hydration in our vulnerable patients, obtaining feedback regarding the preferences of patients in relation to establishing support groups and providing lived-experience in teaching sessions at both Staffordshire and Keele Universities.







As a result of patient feedback on noisy bins, Trust is in the process of replacing metal bins with plastic closing lids. Feedback and suggestions were also instrumental in the redesign of our Complaints leaflet to make the service more accessible to all.

We also include Patient Leaders in our Care Excellence Framework assurance visits to our wards and clinical departments to support with obtaining independent patient and relative feedback.

## **Patient Stories**

We regularly present patient stories within the Trust to help us learn what makes a good, or poor patient experience so that we can identify areas for improvement, here is one of them about Declan, who is 20 years old, told by his mum:

### **Declan's Story**

*I knew early on that there was a problem with Declan's development but the paediatric doctors struggled to put a finger on it. When Declan reached 18 months old, he had his first seizure-this then got the ball rolling and the clinicians started investigating and eventually Declan was diagnosed with Angelman syndrome which causes a global developmental delay and severe learning difficulties. He missed all his developmental "milestones". Mostly, people born with Angelman syndrome (otherwise known as "Happy Puppet Syndrome") are non-verbal and just make babbling sounds. If you know Declan extremely well, you can interpret the sounds to understand whether he is happy or sad, but that is only if you know him very well.*

*Declan can't walk unaided - he walks well with a walker, and we do a walk every day. He can crawl and bum shuffle to get where he wants to go or he uses a wheelchair when we go out. The name Angelman is slightly ironic as Declan can be far from an angel!! Although Declan is 20, he may still grow some more. Puberty is prolonged so he may have as much as 2 more years to grow. This is posing a problem as he also has a curvature of his spine which is getting progressively worse- I do think he is now showing pain with his spine. Declan has been offered spinal surgery however we've held off at the moment as he can bum shuffle and crawl but once he has the surgery, there is a high chance he will lose those abilities.*

*As you can imagine, decisions such as spinal surgery lay very heavily with us as parents - he is obviously in pain but he will lose what mobility he has... We always have to rely on the advice of the clinicians, which means it is of the utmost importance that we build a trusting relationship and good rapport with them so we know they will listen to us and aren't going to jump in with procedures without first considering all options. We have many teams involved in Declan's care-urology, orthotics, cardiology, gastro... at some points in our life it feels that we are literally always at the royal stoke!*





*Declan has a PEG fitted. He can swallow and does eat and drink but he isn't able to take enough to sustain him, so his PEG supports with his nutrition and giving him his medication. The PEG is our lifeline because if Declan decides he isn't going to take his meds or eat something, he can end up with behavioural issues so it is important we are able to get give him his medications. We are currently having to review his medications as his behavioural issues are getting worse but the agreement is that to start on anything new, he needs to have a clear heart and liver, and sadly it was recently picked up that there are issues with both.*

*Declan's behaviour can manifest itself as kicking, biting and hitting out, and one of the things that makes his behaviour worse is anxiety. Sadly there have been a few episodes at UHNM that have meant Declan's anxiety has been worsened, seeing a uniform can upset him. However we've worked on it by coming to the hospital just for a hot chocolate and a visit, to normalise trips and so Declan knows that going to the hospital can be a treat as well.*

*The experience I want to share involved a situation we were involved in when Declan had his PEG changed. He was in the transition period between paediatric and adult services. Declan has had many PEGs fitted over the years - he has to have them under a general anaesthetic- and the paediatric team know him very well and understand the special adjustments that are needed to make sure the procedure goes smoothly. Things such as being first on the list and acting fast so there is no waiting; ensuring Declan has a space of his own, allowing Mum and Dad into recovery to support him and minimalise any behavioural problems while coming round from the anaesthetic, staff asking me to come out if they need to speak to me rather than going into the room... all this has become custom and practice for the paediatric team. We were so very impressed that just as Covid hit, Declan was identified as potentially needing a PEG replacement mid-pandemic so they got him in sooner so they knew he'd be ok for 2 another years.*

*The issue came the first time Declan has his PEG changed within adult services. This time it was down to the dietician team to arrange. I liaised with them and gave them a list of things that were really important to accommodate - the adjustments that meant the most to Declan to make sure his experience was the least traumatic: A space away from everyone else, behind a curtain or in a side room (just not smack in the middle of the unit), he needed a bed to be available in case he needed his continence aide changing (which is a battle at the best of times even at home!!). We needed to be sure that if we were asked to attend for 7am that Declan would be first on the list and there would be no waiting as he can't tolerate more than 40 minutes or so in his wheelchair without it causing pain and anxiety... all the things that are little but are actually so important to support Declan.*

*We were given a date for the PEG insertion and I rang to check that the team were fully aware of the special needs Declan had. I was told the team were aware and had everything sorted, so I felt really reassured.*





*However the day before the procedure the team called me and said that he wasn't on the morning list anymore, he was on the afternoon list. I tried to explain that Declan can't wait, he can't tolerate a pm list - I told the team it wasn't a problem, the PEG wasn't urgent so a date could be rearranged for when he could be first on a morning list. I then received another phone call to say that Declan was on the morning list, just not first and would be later. I asked how much later and was told I could bring him in at 10am... I asked whether he would go straight into theatre as soon as he arrived and was told "yes, yes"... I have to confess that alarm bells were ringing at this point. I contacted Lucy (Learning Disabilities Liaison Nurse) and she agreed to meet me on the Endoscopy unit to explain the situation.*

*We arrived on the endoscopy unit at 10am and Lucy was there to meet us. The sister on the unit was fab - she knew Declan needed a room on his own, somewhere quiet so he was put into a bay at the far end with a curtain that could be pulled closed. Lucy stayed with us. We waited half an hour... Declan was beginning to slightly simmer. An anaesthetist came to see us and assured us it wouldn't be long until he was taken down. Then we were also told "don't worry - the surgeon is still travelling in...." I spoke to Lucy as Declan was now beginning to get a bit louder and more aggressive. The Sister felt that someone should be coming to speak with me, explaining that the team were told the previous day that Declan couldn't do the afternoon list and therefore it needed to be rearranged. We waited another couple of hours and Declan's behaviour was getting increasingly worse. He was getting incredibly distressed, screaming and we were aware it was upsetting some of the other patients who were coming round after their procedures. By this point, we were beginning to realise we would never calm Declan down and it may take restraint to get him under the general anaesthetic. Lucy could see the issue, and the unit sister couldn't apologise enough- she spoke to the surgeon and emphasise how important it was for Declan to have the procedure as soon as possible- the surgeon responded that it was his list and he decided who was to go first.*

*You have to remember that there was already a lot of trust and compromise needed as we had never met the surgeon performing the procedure so it was a big decision for us to allow our son to undergo this procedure with someone we had never even met- this comment did not give us any reassurance at all that the person had any idea of what kind of support Declan (and we) needed. I said that we needed to find out how long and by now, we were bruised and sweating with struggling trying to manage Declan. Eventually a doctor came onto the ward. She spoke to me at the nurses' station, where everyone could hear the conversation. She introduced herself as being the doctor working with the surgeon then proceeded to ask me "is there nothing you can do to calm him down? What's wrong with him?" I was utterly speechless. I listed off all the things wrong with him, not least that he had not been able to eat since 9pm the previous day but I couldn't explain to him why!!! The doctors response was "just feed him then" but then confirmed this would actually cause another 4 hour delay to the procedure but we could go home and come back in.... really??*







*The doctor then went back off to speak to the team, at which point the unit sister apologised yet again. Lucy intervened and agreed that we now had to abandon the procedure. Declan was crying so hard that his veins were all pumped up and red, and he was kicking. Restraint would now be needed to get him under the GA but also for when he came round as he comes round fighting. Just then, the doctor came back and said "we've decided we'll just sedate him for a few hours until we do the procedure" I had to walk away. Declan doesn't have a pre-op sedative as he doesn't like how it makes him feel and I can't explain to him why he feels the way he does. I said "just get Declan in his wheelchair- we're going", and we walked out. That whole experience caused us 24 hours of hell as Declan made it very clear he was extremely angry and unhappy with us. Ultimately that situation did not need to happen. I completely understand that we are all human and mistakes are made but the lack of empathy and reasonable adjustment for one of the most vulnerable cohorts of patient's was just so saddening. I did make a lot of telephone calls to the dietician team, the gastro team and to Declan's CHC nurse to raise concerns about the experience as Declan still needed his PEG changing and we just could not walk back into the same situation.*

*All that being said, the next time we came to have his PEG fitted, the experience was completely the opposite. Lucy was an absolute star and went above and beyond to get everything into place. About 6 weeks later, we were contacted by the Paediatric team who agreed, because of what had happened, they would do Declan's PEG change. The only downside was that Declan couldn't be done first on the list, however because I knew this, I could manage the situation, and fed him later the night before. We were told to come 10 minutes before the procedure time and the team would be waiting for Declan.*

*I knew from the minute we walked in that this time it was going to be different. There was someone waiting to greet us- they said "Is this Declan? Follow me" He was taken to an area in the endoscopy unit that had been kitted out especially for Declan with sensory lights. I was asked if Declan was ok to wait in his wheelchair- when I asked how long it would be I was told there was a team of 10 waiting ready to do the procedure. As we got to the room, all the staff vacated leaving just the anaesthetist and a nurse. Declan went out like a light. We were told not to go anywhere as we could go into him as soon as they were finished. While he was asleep, they did an ECG, blood tests and replaced his PEG. We were able to see him come out of the procedure room and into his recovery room and went to sit with him while he came round. The paediatric anaesthetist actually had a team's meeting with us in the room (with our consent) to discuss learning with other adult anaesthetists to ensure the same mistakes did not happen next time. She asked if we had any issues and I can honestly say we were treated like royalty. When Declan came round he was calm, there was no anger, no anxiety - he went down happy and came back out happy. The anaesthetist actually suggested that a team follow Paediatric Anaesthetists to see how they do it, and to learn that they actually need to listen to their patients, parents and their carers as they genuinely do know how to care for their family member the best.*





## UHNM Learning Disability Strategy

2022 saw the publication of UHNM's first Learning Disability strategy and our focus to improve patient care over the next 5 years. This strategy is overseen by the trusts Mental Health & Learning Disability Steering Group which is chaired by our Chief Nurse.

One of our Learning Disability Specialist Nurses at UHNM supports with Learning Disability awareness and training for our nursing assistants and our newly qualified nurses and overseas nurses.

In January 2023 the Health Education England Oliver McGowan Learning Disability and Autism training was introduced as mandatory across all health and social care, the training is based on the experiences of young patient Oliver McGowan and other people with learning disabilities. Over 7,500 colleagues have already at completed the training across the trust.

## Learning Disability Champions

We have continued to enhance our support and guidance for patients with learning disabilities and their carers by running a series of Learning Disability Awareness sessions for our staff throughout 2022/23.

We currently have 635 Learning disability Champions who work across our services. These colleagues have received a half day training session from the local Learning Disability Health Facilitation Team who also provide regular CPD sessions.



## Learning Disability Awareness Day

The Vulnerable Patient Team at UHNM also celebrated learning disability awareness week setting up a stand by the main entrance with support from experts by experience to speak to staff and visitors regarding Health Passports, training opportunities and referring into the team for further support.





## Mental Health & Learning Disability Conference

UHNM's Mental Health & Learning Disability Conference took place on 30 June 2022 at the Bet365 Stadium. The conference was opened by CEO Tracy Bullock followed by a full agenda packed with a wide range of speakers and topics around Mental Health & Learning Disability to increase understanding and awareness.



**Ensure Equality Impact Assessment is a robust process that offers both assurance and opportunities for improvement that address inequalities to access to services**

### Mental Health Support

Mental Health support at UHNM has been improved, particularly at County Hospital Site. Extra cover provided by the Mental Health Liaison Team between 10pm-2am is to support the Emergency Department with any late attendances for mental health patients. This ensures any patients in the department when it closes at 10pm receive a full Bio-Psychosocial assessment by a mental health nurse, and a risk assessment and risk management plan completed and a plan of care going forward is devised. All assessments, risks identified and Plan of care completed by the MHLT is documented onto UHNM's patient system.

### Meeting our Patient's Communication Preferences



In line with the Accessible Information Standard, the Trust now has the ability to add Accessibility Alerts to our Patient Information System (Medway) to flag and share any communication needs or adjustments a patient may have, including alternative formats. This was developed to ensure patient letters can be generated in the required format. A card has been developed for patients to complete and either email to the Patient Experience Team or hand in to PALS who will then ensure the alert is added to the Medway system.







## British Sign Language Training



Deaf Links, an organisation for people with hearing loss or deafness have supported the Patient Experience Team to run two BSL training sessions for any staff who wanted the opportunity to learn basic communication in British Sign Language to support our colleagues and patients. Due to the demand of these sessions, we are running several more throughout the next 12 months

## Accessible Changing Places Toilet Facility opened at County Hospital

People with disabilities are benefitting from our newly refurbished 'Changing Places' toilet facility at County Hospital thanks to funding from UHNM Charity. The large space is equipped with changing benches and hoists to provide a dignified and secure area for people and their carers to use.



## "It's OK to ask"

We continue to promote our "it's ok to ask" campaign. It's OK to ask is our way of letting our patients know that we want them to feel comfortable asking any questions, so that they fully understand their care.



- Its ok to ask encourages our patients to ask the questions that matter to them
- Be prepared before their consultations and appointments, and
- Have the confidence to say if they do not understand the information they are being given

## Health Literacy

In conjunction with "**It's ok to ask**" the Patient Experience Team continues to ensure that our staff can support patients to understand health and wellbeing information, through our Health Literacy training. In our local region, there are around 20,500 people who struggle with functional skills and 60% of adults have a reading age of under 11 years old, which can impact understanding and decision making in health care, which can impact how well people:



- Manage long term conditions
- Engage with preventative programmes and make informed healthy lifestyle choices; and
- Keep to medication regimes



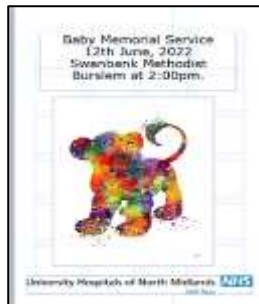




### Spiritual, Pastoral and Religious Care

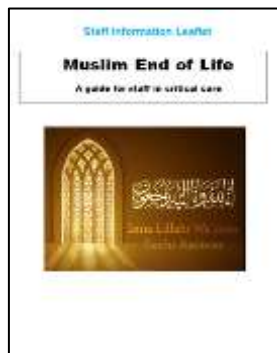
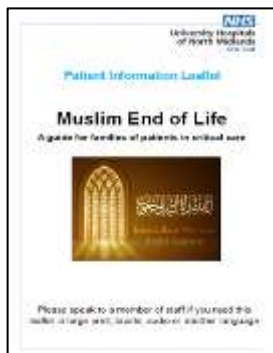
Our SPaRC team continue to support and educate our patients, visitors and staff by undertaking initiatives throughout the year, raising awareness of the services they offer.

The team attended the UHNM Palliative Care Conference to give a presentation on Staff Support and Chaplaincy, held services for Cystic Fibrosis memorial, Baby memorial, Armistice Day and the late Queen Elizabeth’s funeral. SPaRC joined with multidisciplinary teams to support the Patient Experience week held in Critical Care providing teaching to Critical staff on different cultural and religious needs of patients. This included various discussions on end of life care as well the sharing of a patient story about the difference spiritual, pastoral and religious support can make in the recovery process.



### Supporting end of life care for different cultures

The Spiritual Care Team have created supporting guides for families and UHNM Teams about Muslim End of Life Care, which include Quran Cubes, which is a Bluetooth enabled Quran speaker and multi-coloured touch lamp with Adhan 5 times a day, enabling patients and visitors to listen to Quran & Nasheeds in the hospital setting.



Qur'an Cubes





## Patients and service users will be actively involved in service design and governance structures with increased feedback from hard to reach groups

### NHS Equality Delivery System (EDS)

The main purpose of the EDS is to help local NHS systems and organisations, in discussion with local partners and local populations, review and improve their performance for people with characteristics protected by the Equality Act 2010. In June 2022, as a system we held a public session with service users to assess the peer evaluation of our EDS Domain 1 – the commissioned/provided services domain. Evidence was presented on Learning Disabilities Services and Interpretation & Translation Combined Services. Individual Trusts within our integrated care system, including UHNM are presented their evidence for peer review grading by System partners and service users. Using a rating matrix, services can be graded as:

- Undeveloped** scores 0
- Developing** scores 1
- Achieving** scores 2
- Excelling** scores 3



Both services were assessed at 'Achieving' level for each organisation and as a system. Areas of good practice were identified, and a number of areas for improvement for us to focus on:

**Good Practice**

- Hospital Passports in use co-produced with NHS organisations.
- Use of Acute Liaison Nurses; routine use of COVID and Hospital Passports
- Nursing risk assessments have LD focus Checklist
- Easy Read leaflets available for numerous physical health issues.
- Specific Emergency Department Learning Disability training for Nursing Staff
- Trust Awarded for its work on a Maternity Pathway – co produced between adult LD services and local maternity services
- Expert by Experience Advisor roles (RICLIANWARD 2021)
- AccessAble availability at Trust sites

**Good Practice**

- One point of contact and portal: detailed picture of use and coverage, follow up on meeting request/cancellation/no show
- Supporting communities to feedback: engagement, communities Together and HUB networks
- Staff resources and training re: effective use of service
- Supporting over Covid across Shropshire and Staffordshire: community engagement and involvement in steering the Covid programme and developing localised information and resources: Remote video interpreters at vaccination centres
- Easy read documentation and accessible websites
- Risk and safety dashboards for interpreter/communication related incidents- Communication alerts to Patient Records
- Formal complaints process with Provider Companies and quarterly activity reviews

**Areas for Improvement:**

- Develop further the process to complaints and risk reporting
- Develop a consistent and regular approach to obtain feedback from patient, carer and communities about the service
- Improve process of complaints back to provider company
- Continue to develop services to be provided within different platforms: digital remote access and face to face consultations
- Reduce the need to change appointments due to availability of interpreter- more control for patient and organisation to offer timely appointments.

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- Continue to develop services to be provided within different platforms: digital remote access and face to face consultations
- Continue to improve recording of all equality data for LD Service users
- Scope AccessAble implementation across other NHS and wider ICS level.
- Review the links within organisations at PCN and GPs- sharing of seamless service and information.





## OUR PEOPLE

### Workforce Equality, Diversity and Inclusion

Our UHNM EDI Strategy was developed with input from our UHNM colleagues and employee voice networks who helped develop our EDI workforce priorities. The strategy demonstrates our commitment to ensuring that equality, diversity and inclusion is core to our business and that our organisation is a place where all of our colleagues, patients and service users feel treated with dignity and respect and we achieve the best performance and health outcomes. We have set ourselves 4 workforce equality objectives for the next 3 years:

1. Listen to, understand and learn from the experience of all staff
2. Respect and value all colleagues and their contribution and have a strategic focus on civility and respect
3. Develop a culture of inclusive and compassionate leadership
4. Ensure that people are recruited, trained and promoted according to their abilities and in the proportions one would expect for the populations represented

### UHNM Workforce

Data 31<sup>st</sup> March 2023



### UHNM People Strategy

This year we launched our **People Strategy – Making UHNM a Great Place to Work** which sets out our ambitious 3-year work programme through four key domains:



We will look after our people by supporting our people to be healthy and well, both physically and psychologically, and when unwell ensuring they are supported.

We will grow and develop our workforce for the future by attracting, recruiting and retaining our people.

We will create a sense of belonging where we are kind and respectful to each other by creating a positive and inclusive culture which is reinforced through our Being Kind programme.

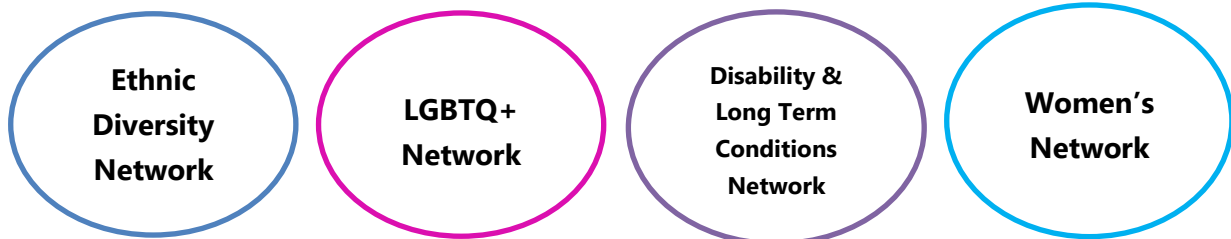
We will develop our people practices and systems by promoting and using new technologies and equipping our people with digital awareness and skills.





## Listen to, understand and learn from the experiences of our people

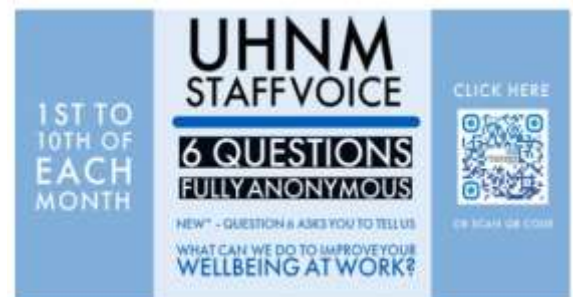
Our Employee Voice Networks continue to grow and develop. Each of our networks has a chair with protected time, and the support of an Executive Sponsor, whose role is to ensure the voice of the networks is heard at Board level. The networks identify priority areas of focus and work in partnership with the organisation in the development and creation of initiatives to improve workplace experiences, in addition to celebrating key events in the diversity calendar, as well as being a safe place for members to access peer support and networking.



## Listening to our colleagues about how it feels working at UHNM

Staff Voice is our new anonymous monthly staff survey designed to help us understand key issues important to our colleagues about wellbeing, inclusion and to enable improvements in the workplace and patient care.

Staff Voice is open to all staff to complete during the first 10 days of each month and gives everyone the opportunity to feedback how they feel about working at UHNM in less than 5 minutes.



We have introduced new electronic dashboards to measure changes in employee experience based on the feedback from the Staff Voice and in turn we share the learning and changes made in You Said, We Did communications.

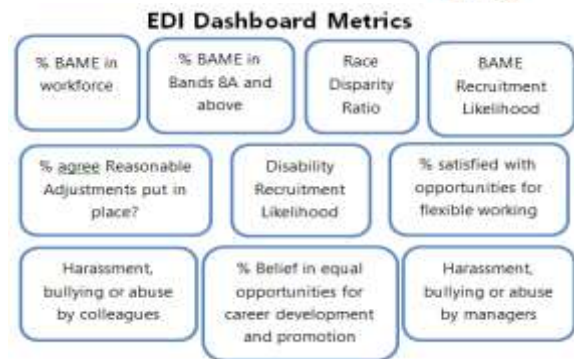






## EDI Dashboard

Effective from April 2023 we have created EDI dashboards for each of our Divisions so that they can monitor key EDI metrics, and use these to identify EDI priorities in their areas.



## Reciprocal Mentoring

We started our second cohort of reciprocal mentoring in early 2023, where a senior leader is mentored by a colleague from a protected group. This form of mentoring can be effective in supporting culture change by establishing greater awareness of organisational, cultural, leadership and social inequalities which prevent career progression and development for those in underrepresented groups. It flips the usual mentoring relationship on its head, so that senior leaders have the opportunity to listen, learn and co-create a more inclusive culture for the benefit of our staff and patients. Here our Chief Executive Tracy Bullock shares her reciprocal mentoring story:

*As the CEO of UHNM I was very keen to fully support the Reciprocal Mentoring Programme which for me had two aims; firstly to give me, as a white member of staff in a senior leadership role greater insight into the lived experience and development needs of my Mentor who was a minority ethnic colleague; and through this experience to support our organisational cultural transformation programme.*

*I was delighted to be matched with my first Mentor over 18 months ago and I am pleased to be starting my relationship with my second Mentor. The Mentoring sessions to date have allowed me to use the experience of my Mentor to build on the work of our cultural transformation programme and to support our aim of valuing a culture of diversity, equality and inclusion. It more readily allowed me to understand and respect our differences and to challenge my own bias which I only began to really understand through this relationship. As equal partners we shared our lived experiences, as well as understanding the skills, knowledge and networks that I and UHNM need to enable us to champion change, influence peers and inform decision making through our hospitals together.*

*My Mentor opened a window to a world which would otherwise not have been possible to glimpse or understand. How could I know what it felt like to be racially abused, to be ignored or overlooked? Whilst these experiences were thankfully not at UHNM they were no less meaningful in supporting our journey and the changes we need to make to ensure all our colleagues feel valued and respected.*





**To respect and value all colleagues and their contribution and have a strategic focus on dignity and respect**



**Being Kind**

Our Being Kind approach to creating a kind, respectful and inclusive culture was launched in October 2022 at the UHNM Leadership Conference. The Being Kind approach includes our Being Kind Behaviour Compact, created with our staff, and includes guides for colleagues and managers. The Being Kind approach complements our new Resolution Policy, also launched in 2022. The Being Kind Compact is built into our ENBALE leadership development programme and Belonging in the NHS inclusivity master class.



**Expanding our Employee Support Advisors**

Two training sessions were held during December for 20 new Employee Support Advisors to add to our existing team. ESA's are voluntary roles offering confidential and impartial peer support to colleagues experiencing disrespectful behaviours at work. ESA's help to guide colleagues through our resolution process and are a sympathetic listening ear.





## Respecting people's names and pronouns

We launched a campaign to pronounce people's names correctly, using a range of tools such as the UHNM designed email footer (created with our Ethnic Diversity Staff Network) or the nationally available 'Name Coach' and 'My Name is' voice recording tools.



We recognise that our names should be treated with dignity and respect, and that it's important that we can come to work and be ourselves in an inclusive and welcoming environment. Names have a history, based on tradition, culture and religion. We often honour our heritage when giving our children their names.

It is perfectly normal to find it difficult to pronounce some names due to unfamiliarity, particularly if coming from diverse cultural backgrounds, but when our names are mispronounced, even if it's unintentional, it can be hurtful, leaving us feeling undervalued or that we don't belong, our new email footer helps by phonetically sharing our names.

We celebrated LGBT+ History Month with our pronoun campaign. Using someone's correct pronouns is a way to respect them and create an inclusive environment. One of the easiest ways to do this is to share your own pronouns. In doing so, we invite other people to share their pronouns, allowing them to state how they wish to be referred encouraging colleagues to share their pronouns.







## Disability Champions

We introduced our new initiative – ‘Disability Champions’ during Disability History Month 2022 with over 20 volunteers from our Disability & Long Term Conditions Staff Network undertaking specialist training from Disability Rights UK (DRUK) to enable them to provide effective peer support to colleagues with disabilities.



*Georgia Fox  
Senior Recruitment and Retention Officer*

*My reasoning for becoming a ‘Disability Champion’ is that I am passionate about creating a kind and respectful culture across the Trust as well as a fair Recruitment process with equality and without discrimination. I hope I can play my part by supporting staff with disabilities and long term health conditions. Whether you need a listening ear or require some further staff support, please reach out as I would be more than happy to help.*

## UHNM Disability Champions

Disability Champions are UHNM colleagues and members of our Disability & Long Term Conditions Staff Network who are passionate about supporting staff with disabilities and long term health conditions. Champions have undertaken specialist disability training and can support colleagues by:

- Being a confidential listening ear for colleagues with a disability or long term health condition
- Provide an informal and friendly 'buddy' role to colleagues who may be newly diagnosed or new to the organisation with a disability or long term health condition
- Raise awareness of the Tailored Adjustments Plan and Trust process for reasonable workplace adjustments
- Signpost colleagues to additional staff support and resources
- Support colleagues with a disability, neurodiversity or long term condition whether seen or hidden to have a voice
- Support the organisation to improve workplace experiences for colleagues with disabilities and long term health conditions



## UHNM Carers Passport



Our new Carers Passport has been launched for UHNM staff who care for family or friends who have a disability, illness or who need support in later life.

The passport has been designed with the intent of offering assistance to colleagues who have caring responsibilities which may affect their work now or may do in the future.

It is a ‘live’ document offering the assistance to carry out an open conversation with colleagues/line managers which relates to relevant Trust policies and allows access to the right support and help when it is needed it







### NHS Rainbow Badge Accreditation Report



In September 2022 we received our NHS Rainbow Badge Accreditation feedback report. The scheme allows NHS organisations to demonstrate their commitment to reducing barriers to healthcare and positive workplace experiences for LGBTQ+ people, whilst evidencing the good work they have already undertaken. UHNM has received an overall outcome of Initial; and a group has been established to take forward an action plan based on the recommendations within the report.

We were delighted to achieve a Silver level award for the Workforce Assessment

### Menopause Awareness and Workplace Guidance

In March 2023 we introduced our Menopause Guidance. Our aim is to create an environment where staff can talk freely about the menopause, and to provide information to women experiencing symptoms at work and to guide our managers on appropriate support for their staff. The Guidance complements our other resources including an e-learning package and regular menopause cafés.



Our Menopause café continues to run online. At these sessions Menopause Specialists from within and outside of the Trust provide expert information and guidance, with topics covered including:

- How do I talk to my partner about menopause?
- How to have a wellbeing conversation
- Common symptoms and symptom management





## To develop a culture of inclusive and compassionate leadership

We continue to build, strengthen and develop initiatives focused on colleague experience; wellbeing & engagement and culture & leadership development.



### Race Equality Code Assessment

We were delighted to be awarded the prestigious RACE Equality Code Quality Mark in recognition of our work to support race equality and ability along with our determination to eliminate all discrimination in the workplace. The RACE Code stands for Reporting, Action, Composition and Education and is based on current laws, reports, charters and pledges, meaning the Trust's work has been based on recognised best practice.

The Race Code is designed to support organisations identify ways in which they can continue to improve diversity and race equality within their services – ensuring employees and service-users feel both valued and understood.

To be awarded the mark, an in-depth assessment was required, looking at how inclusive UHNM is of staff and patients, as well as the work being undertaken to further improve and support our diverse workforce. We have created an action plan which will be part of our race equality priorities over the next 3 years.



### New Leadership Programme

A key strand of our cultural development programme has been the introduction of a new leadership programme for line managers that has been designed to embed appreciative, compassionate and inclusive leadership within UHNM, entitled Enable.

The programme was successfully launched at the beginning of April 2022. In the first year of activity we have trained over 600 staff. The programme has a focus on increasing awareness and understanding of diversity and inclusion, and creating a culture where everyone who works at UHNM feels valued and included.





## ICS Inclusion School



As a wider integrated health system the Inclusion School series continued in 2022-23. The Inclusion School format is based around personal lived experience, story-telling and conversation by some truly inspirational guest speakers designed to inform and positively challenge participants. Inclusion School is open to all colleagues and we held three sessions during the year:

- **Inclusion School: Big Question on Inclusion and Intersectionality**, with guest speaker John Amaechi
- **Inclusion School RACE Forward: Your Role in Creating an Anti-Racist ICS** with guest speakers, Karl George MBE and Yvonne Coghill CBE
- **Inclusion School The Colour Purple: Mind the Gap (Understanding and Supporting People with Disability and Neurodiversity)** with guest speakers Liam Pooney from Lexxic (Neurodiversity experts), Kerry Pace from Diverse Learners, Parvin Morris from NHS Employers and Haseeb Ahmad, Leicestershire Partnership NHS Trust

**To ensure that people are recruited, trained and promoted according to their abilities and in the proportions one would expect for the populations represented**

	<b>BAME Headcount at 31.03.23</b>	<b>Model Employer Target</b>
<b>Band 8A</b>	<b>32 (25)</b>	<b>31</b>
<b>Band 8B</b>	<b>6 (5)</b>	<b>7</b>
<b>Band 8C</b>	<b>1 (2)</b>	<b>3</b>
<b>Band 8D</b>	<b>1 (0)</b>	<b>1</b>
<b>Band 9</b>	<b>0 (0)</b>	<b>1</b>
<b>VSM</b>	<b>1 (0)</b>	<b>1</b>

### Diversity in our Leadership Profile

Our progress against the NHS England Model Employer Aspirational Targets for Black, Asian and Minority Ethnic (BAME) representation in senior leadership roles continues in a positive trajectory (previous year figures in brackets). This remains a priority area for UHNM and each division monitors their race disparity ratio (the differential in representation between white and BAME colleague progression rates) as part of their EDI Dashboard.







## Careers Ambassadors

This year we have continued to develop our UHNM Careers Ambassador programme. Colleagues share their passion by volunteering to become a Careers Ambassador and take part in careers events visiting local schools to promote healthcare roles and to reach diverse communities. Our very successful first Step into Medicine virtual session presented to budding doctors of the future had some great discussions. We definitely have a local future workforce coming into UHNM!



## New Futures Programme



UHNM participants have completed the Staffordshire New Futures programme, which is a targeted development programme for aspiring BAME leaders. On-going access to coaching with a qualified coach, undertaking a work style inventory – ‘Strengths Deployment Inventory’ (SDI), and a talent management career conversation – ‘Scope 4 Growth’ are part of the Alumni support. The programme will track career progress of participants who continue to be encouraged and empowered to make self-motivated progression. Cohort 5 of the programme commenced in March 2023, with over 30 UHNM colleagues successfully gaining a place.

## Veteran Aware Accreditation renewed

We were delighted to have our Veteran Aware accreditation renewed, recognising UHNM as an exemplar of the best care for veterans and leading the way in improving veterans’ care within the NHS. The accreditation acknowledges the Trust’s commitment to a number of key pledges, including:



- Ensuring that the armed forces community is never disadvantaged compared to other patients, in line with the NHS’s commitment to the Armed Forces Covenant;
- Training relevant staff on veteran specific culture or needs;
- Making veterans, reservists and service families aware of appropriate charities or NHS services beneficial to them, such as mental health services or agencies to support with financial and/or benefit claims;
- Supporting the armed forces as an employer and offering the guaranteed interview scheme to veterans who meet the essential criteria for a job







### Celebrating UHNM as a diverse employer



UHNM was back at Stoke Pride in June 2022, promoting inclusive healthcare and employment alongside our system partners. UHNM LGBTQ+ Network was present, alongside other NHS provider partners promoting our initiatives for LGBTQ+ inclusivity.

### Race Equality Week February 2023

We marked Race Equality Week with a social media campaign with quotes from our colleagues about what race equality means to them (examples below). We also promoted the race equality week challenge, which was a 5 day challenge where participants accessed short educational and awareness about racial equality each day of the week.



### Black History Month

We celebrated Black History Month with a month-long calendar of events, which included the unveiling of our new inclusion banner at Royal Stoke Hospital and County Hospital by CEO Tracy Bullock and Ethnic Diversity Staff Network Chair Joe Orosun. The banner shows 108 flags representing all the different nationalities that work at UHNM.





As part of Black History Month celebrations, we invited staff to wear red on the 22<sup>nd</sup> October to show their support for the annual Show Racism the Red Card event.



### UHNM nurse wins Royal College of Nursing national award

One of our nurses scooped a regional award as part of black history month celebrations for making a difference to staff and patients. Manju Mathews, a Urology and Anaesthetic Nurse at County Hospital in Stafford, was nominated for a Royal College of Nursing (RCN), West Midlands Black History Month Making a Difference Award by UHNM Chief Nurse Ann-Marie Riley.

Ann-Marie said: "I nominated Manju for the amazing support she has provided to international nurses both professionally and outside of work. Manju utilises her own experiences in helping others to integrate and to ensure the nurses feel included and valued. Her compassion for others exceeds expectations. Winning this award highlights the impact Manju has on her colleagues. A huge congratulations to her on this great achievement."



### Ramadan

For the first time, our partner organisation Sodexo at Royal Stoke University Hospital launched a Ramadan Meal Deal as well as a Daily Iftar Menu to celebrate Ramadan – for patients, visitors and staff. In addition, we supported colleagues observing Ramadan with FAQ's and a guide issued to help colleagues and managers to support effectively, and provide guidance on observing Ramadan.

**Ramadan Meal Deal**  
£8.50  
Main meal\*, rice, poppadom, side salad, Chocolate Cookie, fresh fruit and bottle of water & date

Daily Iftar Menu;

- \*Chicken Dopiaza – Monday
- \*Goan Chicken – Tuesday
- \*Chicken Madras – Wednesday
- \*Chicken Jalfrezi – Thursday
- \*Chicken Tikka Masala – Friday
- \*Chicken Madras – Saturday
- \*Channa Masala – Sunday

Pre-order from Monsoon To Restaurant  
Phone ext. 72671, 7033 for 20 Persons by 4pm daily  
Collection from 18.30 – 20.15

All items subject to availability

**sodexo**  
HEALTH & CARE







## UHNM awarded NHS Pastoral Care Quality Award

This award recognises the commitment UHNM has made towards international recruitment and for providing high quality pastoral care to internationally educated nurses and midwives during the recruitment processes and their employment. Stella Underwood, UHNM International Nurse Lead said “we are very proud to receive this award and be recognised for the work we do for our international nurses and midwives. We always ensure our nurses and midwives feel supported and guided through every step of their journey with UHNM”



## UHNM welcomes international neonatal nurses

Four international nurses have been recruited to provide specialist neonatal care at UHNM for the first time, joining the Neonatal Intensive Care Unit (NICU) at Royal Stoke University Hospital in May 2022. Our international nurse recruitment programme was launched in 2021 and has successfully recruited more than 200 nurses from across the world. Nurses have been employed at Royal Stoke University Hospital and County Hospital.

Manju, NICU staff nurse, said: “I was working in Kuwait for 12 years and wanted to progress within my profession and improve my skill which is why I came to the UK. I have received a lot of support and care from the whole team and my mentors. Royal Stoke is a really nice place to work, I enjoy it here. My NICU team is my family, its home away from home.”



In December we congratulated the latest cohort of overseas nurses who have passed their Objective Structured Clinical Exam (OSCE). The international nurses, from India, Saudi Arabia, Jamaica, Guyana, Zimbabwe, Kuwait and Qatar, arrived as qualified nurses in their own country but are required to complete an OSCE to become an NMC recognised nurse in the UK.

The latest cohort takes the total number of international nurses recruited to work at UHNM since 2021 to 217 nurses.







## Disability History Month 2022

Our 2022 focus was on creating a disability positive and inclusive workplace, promoting our support for colleagues with a disability or long term health condition, as well as launching our Disability Champions initiative.



## International Women's Day

At UHNM we celebrate our women colleagues every day, however, to mark International Women's day in March we sent out a special thank you to the amazing women at UHNM who inspire us daily.



We also marked International Women's Day with a webinar about the options available to all staff within our flexible and agile policies, recognising the benefits of a healthy work-life balance for our colleagues, and how this in turn supports attraction and retention of our workforce.





## Appendices

- Service User and Workforce Demographic Report

