

# ESNEFT PUBLIC SECTOR EQUALITY DUTY ANNUAL COMPLIANCE REPORT

**January – December 2022** 

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KATE READ,
DIRECTOR OF PEOPLE &
ORGANISATIONAL DEVELOPMENT



We are delighted to present our Public Sector Equality Duty Compliance Report for the East Suffolk and North Essex NHS Foundation Trust (ESNEFT). With executive responsibility for Equality, Diversity and Inclusion, we are absolutely committed to ensuring that whatever we do makes a positive difference for our patients, their families or carers and our staff.

Our Equality Compliance report provides details of our workforce and service data as required by Equality Act 2010 (specific duties). We have continued to work hard to provide increased visibility and focus to the Trust's Equality, Diversity and Inclusion agenda and workplan; supporting and further establishing our staff networks, continuing to establish and embed the role of our Cultural Ambassadors and we are working closely with external partners including; locally based The OutHouse as well as Nottingham and Essex Universities. We fully recognise we are at the early stages of our EDI journey however, we are committed to working with all of our stakeholders and our strategic partners, regionally and nationally, to improve equality outcomes for all.

The publication of this report is one of our core responsibilities under the Equality Act 2010 and supports the delivery of the general Public Sector Equality Duty (PSED). Our focus is not only on compliance, we want to add real value to the lives of our communities and staff by removing any barriers that may exist. At ESNEFT, we celebrate difference and harness it for the benefit of our patients and staff. We want all of our diverse groups of staff to feel fully engaged and supported within the workplace.

We know that there is a direct correlation between outstanding care and positive staff experience. Making sure EDI is embedded into our organisation is critical as it affects patient care and experience, patient safety as well as organisational efficiency. The EDI agenda is a key principle of our People and Organisational Development Strategy which was developed and rolled out in 2021 and is refreshed annually. This sets out our ambition to be a model employer and Employer of Choice. We know that in order for our organisation to develop, we have to be an inclusive employer with a diverse and representative workforce at all levels. The importance of inclusion is embedded into the NHS Five Year Forward View; NHS Long Term Plan and the NHS People Promise.

Inclusion is integral to all activities to ensure we provide the best health and care services to the diverse communities we serve.

#### **Executive Summary**

Equality, Diversity and Inclusion (EDI) matters greatly to us as a Trust. The Board of Directors recognise the importance of EDI as being critical to delivering excellent patient care and supporting staff to feel that ESNEFT is a brilliant place to work, a Trust they would recommend and an Employer of Choice.

We are committed as a Trust to the elimination of discrimination, harassment and reducing health inequalities by promoting equity of opportunity and dignity and respect for all our patients, service users, their families, carers and our people. The key responsibilities for ESNEFT, as one of the largest East of England employers and provider of services, are: to call out inequity wherever we see it; take the appropriate actions; and most importantly proactively promote inclusion and respectful interactions for all of our colleagues, patients and service users. We want it to help drive our performance and to enable us to meet our commitment and passion to make a difference to the lives of our staff, service users, carers, patients and the diverse communities we serve. ESNEFT is committed to being a local, regional and national leader in terms of its focus on EDI for patients and staff alike.

The focus of this report is to provide a high-level summary of our workforce and service use data. It is a compliance requirement under the Equality Act 2010 (Section 149: specific duties). Publication of this information will ensure that East Suffolk and North Essex NHS Foundation Trust (ESNEFT) has met its legal requirement. This report covers data from 1 January to 31 December 2022.

The key findings from our data analysis in this report are:

#### Workforce profile:

- Data quality has improved through increasing disclosure rates, particularly in relation to; disability (an improvement from 38% of total workforce population disclosure in 2021 to 55% in 2022) ethnicity (non-disclosure rate is 0.73% of total ESNEFT workforce population) religion and sexual orientation (non-disclosure rate of 33% of total ESNEFT workforce population)
- Underrepresentation of BAME colleagues at pay Band 6 and above continues to present an area of concern and this has been identified in our WRES Action Plan to encourage career progression and tackle barriers to personal and professional development
- We have an ageing workforce, with staff members aged 41+ being in the dominant position. Increase of staff group aged 31-35 is visible for year 2022.

#### Service user data:

• We do not presently capture data information on disability, gender reassignment or sexual orientation. The protected characteristic of pregnancy is not reported on for patient data. Our service profile is broadly representative of our local population however work is needed to understand the patient experience for all groups. There is considerable data that is unknown for the protected characteristic of religion and belief and ethnicity data indicating an under representation of BAME and minority faith communities. Our complaints team now record any feedback from patients in relation to the nine protected characteristics. This supports us to understand better, improve our services, and learn from our mistakes.

• The gender profile shows women being over represented in our Inpatient and Outpatient Services. A&E services show a somewhat proportional level of access between men and women (49% and 51% respectively).

We are very proud to report on the work of our Staff Networks (EMBRace, LGBTQ+ and ESNable), our bespoke LGBTQIA Awareness Sessions (The Outhouse), Talk to Transform race awareness programme (part of the University of Essex Dare to C.A.R.E programme) and our Reverse Mentoring Programme (part of the ReMEDI Programme from Nottingham University) all of which are making a real impact in the organisation. For the next twelve months, our four key strategic priorities will be to:

- Better understand our equality data and provide better reporting
- Continued focus on EDI governance and ensure compliance related to all mandatory work streams including the Equality Act (2010) and the Trust's duties as a Public Sector organisation.
- Support focused schemes of work on patient experience and wider engagement with the communities we serve
- Work as part of the wider cultural transformation programme to move towards an inclusive and compassionate culture for the organisation through the continued support and development of our inclusive Staff Networks, RCN Cultural Ambassadors

With the publication of this report, we are confident that we have complied fully with the Public Sector Equality Duty under the Equality Act (2010), but recognise that further work and focus is required to enhance our performance in the areas listed above.

#### INTRODUCTION

ESNEFT provides hospital and community healthcare across a wide geographical area with a diverse population of approximately 978,600 residents. The purpose of the report is to ensure we comply with the duties laid out in the Public Sector Equality, (Section 149: Equality Act 2010) to ensure that as an organisation and employer we are:

- Eliminating unlawful discrimination, harassment and victimisation and any other conduct that is prohibited by or under the Equality Act 2010;
- Advancing equality of opportunity between people who share a protected characteristic; and people who do not share it;
- Fostering good relations between people who share a relevant protected characteristic and people who do not share it.

The information contained within this report provides an overview of the Trust's equality and diversity data across the nine protected characteristics for our workforce and service user's data as laid out in the specific duties of the law. This report provides further information and year on year progress updates on our **Equality, Diversity and Inclusion Strategy Implementation Plan 2021-2024** and our **Trust Equality Objectives 2020-2024**.

## What is the Public Sector Equality Duty?

The Public Sector Equality Duty (PSED) supports good decision-making by ensuring the Trust considers how people who have protected characteristics will be affected by our activities, helping us to deliver policies and services which are efficient and effective, accessible to all and which meet different people's needs. The report covers data relating to seven of the nine protected characteristics included in the Equality Duty which are:

- Age
- Disability
- Gender reassignment (data not currently recorded in the NHS England HR Information System)
- Marriage and civil partnership
- Pregnancy and maternity (data not currently recorded in the NHS England HR Information System)
- Race/ethnicity Faith or belief
- Gender
- Sexual Orientation

## Why is Equality data and information important?

The purpose of equality data is to provide a measurement framework to enable organisations, specifically public sector bodies, to know where discrimination and exclusion exists. Equality data can shed light on groups that are at risk of discrimination. This report considers equality information held about our staff and service users broadly in terms of our Workforce profile and Service user profile.

Our EDI work starts with understanding our staff and working with our leadership community to establish a culture of inclusion leadership in the organisation. As a newly merged organisation we will use this opportunity to enhance our staff and patient experience by using the data we hold to identify barriers that may exist for specific groups of staff. We know that when staff experience good patient experience then health outcomes improve. A key focus of our work is to robustly understand our equality data in relation to workforce and service users.

The report focuses on providing a high-level summary of the workforce and service user information by protected characteristics. We are committed to improving our data quality in relation to capturing information about protected characteristics for staff and service users and this will be a core part of the EDI work streams. We are currently in the process of extending the data provided to ensure we include a broader view of the workforce data that covers:

- Recruitment
- Leavers
- Sickness
- Employee Relations (Sickness absences, Capability, Bullying and Harassment, Disciplinary and Grievance)
- Promotions

- Training
- NHS Staff Survey and Staff Friends & Family Test Results

For service delivery, we would also seek to extend the information and data we will provide to ensure it covers our:

- Patient experience data (Friends and Family Test results) and any in patient and national surveys
- Complaints and PALS data
- Volunteers, Governors and members demographic profile.

The Patient Experience Team are in the process of designing an EDI patient user group to help us understand the needs of our diverse communities. The complaints that are received within the organisation are now recorded under the nine protected characteristics to ensure that learning is undertaken and complaints received from our communities are recorded accurately to ensure shared learning across the organisation.

The Trust welcomes and encourages coproduction. Although the Covid pandemic had an impact on the extent to which we have been able to engage with our communities, work has resumed to re-establish focus groups to increase our engagement with diverse communities to understand and remove any barriers that may be in the way.

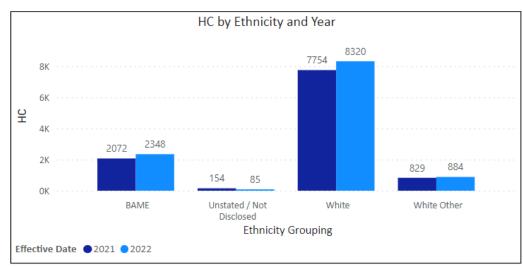
#### Our workforce data

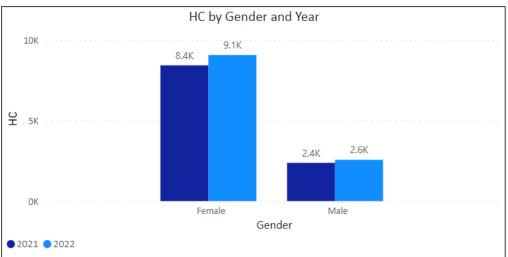
This report provides information and data for the period from 1 January to 31 December 2022.

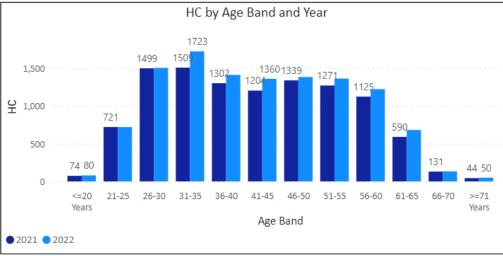
This section of the report focuses on workforce analysis in order to have a better insight into our organisation, its workforce and its culture in turn leading to improvements as an employer. This report provides an overview on key workforce equality and diversity data and considers the proportion of personal information disclosed for each protected characteristic. There are important points to note on the data analysis of staff members under one of the nine protected characteristics. It should be noted that some protected characteristics are not recorded on the NHS England's HR Information System (ESR) eg. gender re-assignment. In addition, disability is referenced as a whole and is not broken down beyond that.

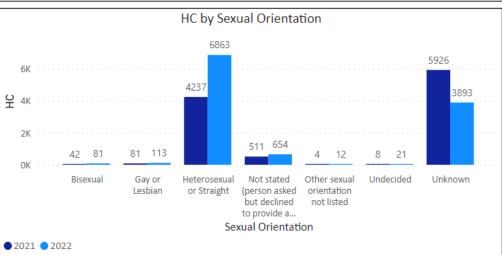
Protected	Analysis
Age	ESNEFT has a relatively high proportion of staff in older age groups. The largest group of our staff members are aged 41+ (53%) followed by 40 % of our workforce aged 26 – 40. Our younger age group (16 to 25) make up the smallest group of the Trust's workforce, at only 7 %. The Trust seeks to attract people of all age groups through a range of measures, such as the widespread provision of work experience opportunities, apprenticeships and the promotion of flexible working. To particularly focus on our younger staff groups we are working with local schools and colleges promoting the wide and varied career opportunities that the NHS offers including the promotion of apprenticeship opportunities.
Disability	Our workforce data shows that 3% of staff have declared to have a disability with 56 % of staff declaring no disability and 0.9% preferring not to answer. There has been considerable progress in reducing the non-disclosure rate, 38% in 2022 compared to 55% in 2021. We will continue to work on non-disclosure rates in order to better understand our workforce.
Gender (Sex)	Female staff make up 78% of the workforce and 22% are male, which is consistent with the national gender profile of the NHS. The gender split in the North Essex and East Suffolk local community area is 49.2% Males and 50.8% Females based on the ONS 2021 Census.
Ethnicity race*	For the purposes of this report, the Trust has combined staff categories as Asian, Black, Mixed, Other, White 'other' ethnic groups, White and Undisclosed. The White category incorporates staff that identify as White British, White Irish/Scottish and White 'other' ethnic background. BAME includes staff who identify as Asian (Indian, Pakistani, Bangladeshi), Mixed (White Black/Asian), Black (Caribbean, African) and Other (Chinese and Any Other). This is in line with the Office of National Statistics' Census categories
	The analysis shows that 71 % of the workforce identify as white British with 8% as 'other' white ethnic background, and 20% as BAME staff. Following a targeted approach to disclosure of ethnicity during 2022, the number of staff with unknown ethnicity reduced significantly to 0.73%. We have an ethnically diverse workforce in comparison to the local populations of Essex and Suffolk however data continues to show a underrepresentation of BAME colleagues in Bands 6 and above which remains a key focus moving forward.
	*Due to the continued use of BAME by the NHS England HR Information System and to protect the integrity of the data we continue to reference BAME. We recognise the importance to move to follow guidelines provided on Gov.uk on how we refer to 'ethnic minorities' or 'ethnic groups' going forward.
Marriage & Civil partnership	The largest group of our workforce is married (50%), whilst 36% are single, 5 % are divorced, and 2.6% are in civil partnerships, legally separated or widowed. Marital status under unknown is at 4%.
Religion	The largest group of staff for whom we have information categorise themselves as Christian (32%), other minority faith communities make up 13% of our workforce with 12% recorded under Atheism. The category of "unknown" is 33% and staff not wishing to disclose is 10%.
Sexual Orientation	The largest group of staff for whom we have information categorise themselves as heterosexual (59%), 2% of our workforce identify as part of the LGBTQIA+ community. We still have a significant proportion of staff (33%) under unknown and we will continue to improve the disclosure rates. 6% declined to provide a response.

#### Jan-Dec 2021 / Jan-Dec 2022 Comparison

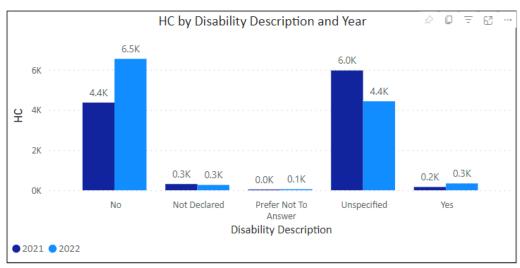


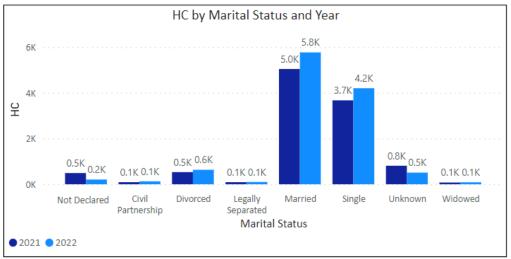


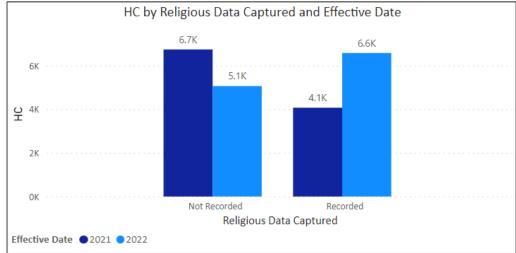




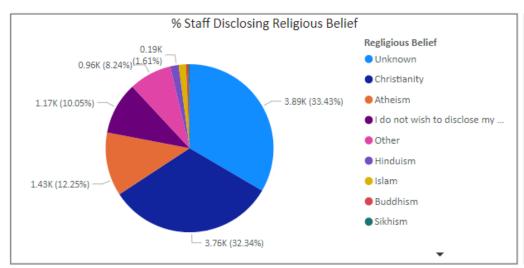
#### Jan-Dec 2021 / Jan-Dec 2022 Comparison

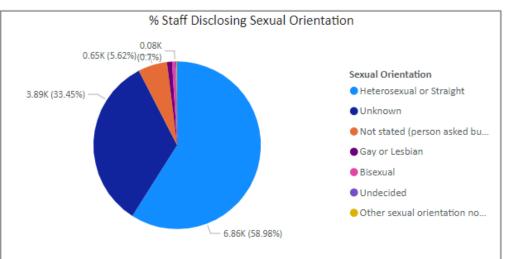


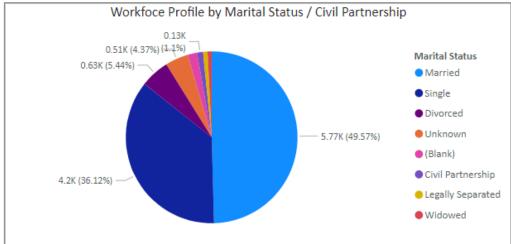


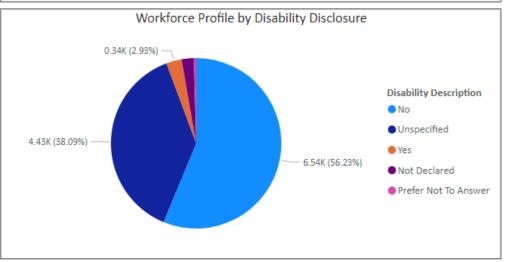


#### Workforce Profile Jan –Dec 2022

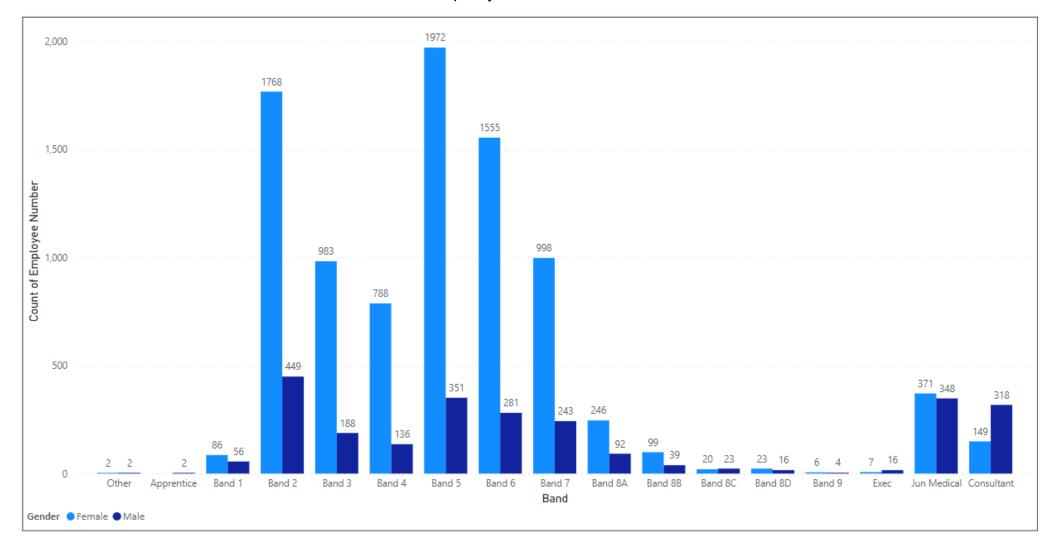




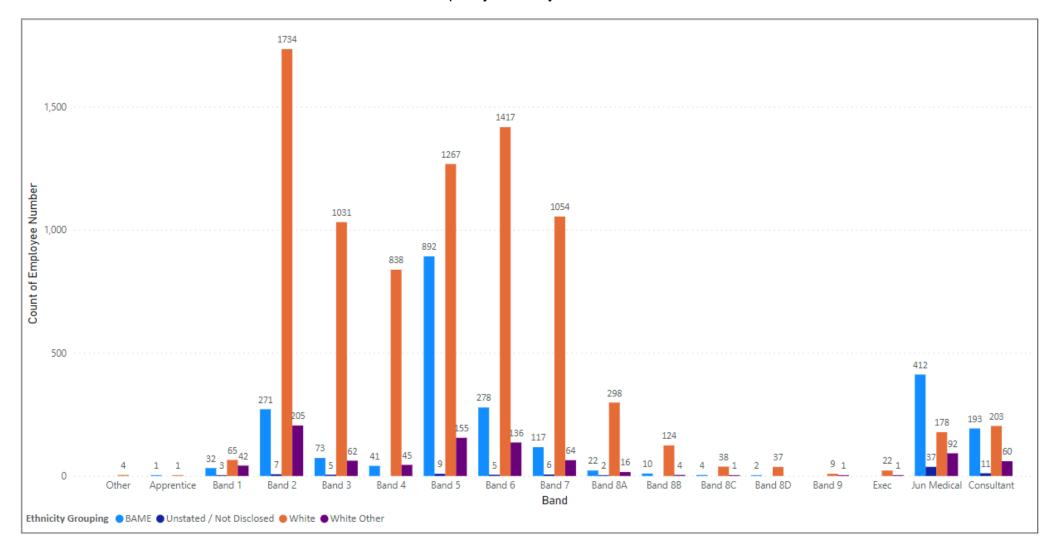




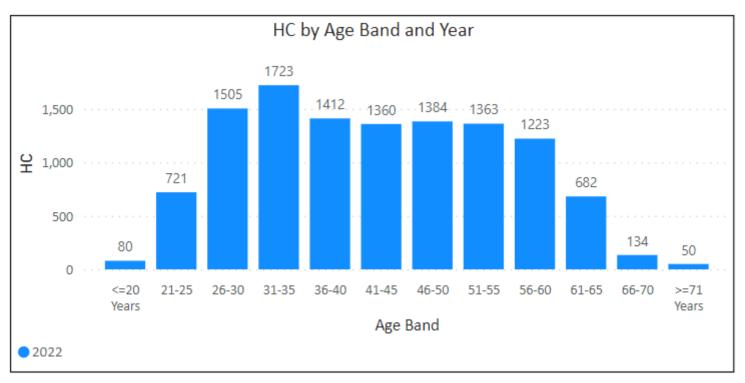
## Band split by Gender Jan-Dec 2022



## Band split by Ethnicity Jan-Dec 2022



#### Age Bands Jan-Dec 2022



# Employee Relations – Disciplinary Cases by Ethnicity

Formal disciplinary cases by ethnic origin - Jan 2022 - Dec 2022					
	No of Cases	% of cases	BAME	NON BAME	Not stated
Open	9	15%	0 (0%)	9 (100%)	0 (0%)
NFA	18	31%	4 (22%)	13 (72%)	1 (6%)
Informal	4	7%	0 (0%)	4 (100%)	0 (0%)
Sanction	28	47%	7 (25%)	20 (71%)	1 (4%)

(Trust wide comparison of ethnicity - White: 78% BAME: 21% Undeclared: 1%)

#### Our Service Users data

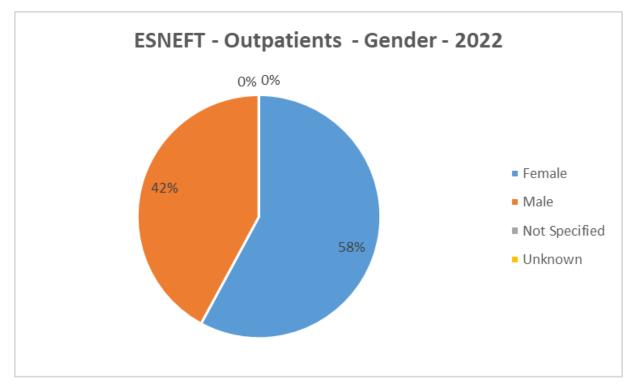
This section focuses specifically on the demographic profile of our service users. The data looks at all Inpatient attendances, Outpatient appointments and A&E attendances. The data used to produce the service user profiles in this section comes from our electronic patient records. The data in this report pertains to the following protected characteristics:

- Age
- Race (ethnicity)
- Religion or belief <sup>1</sup>
- Sex
- Marriage and civil partnership

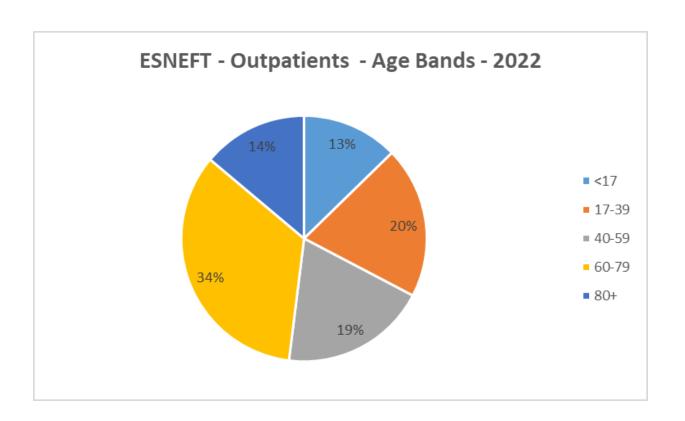
We do not presently capture data information on disability, gender reassignment or sexual orientation, increasingly NHS Trust across the system collect this demographic information. The protected characteristic of pregnancy is not reported on for patients. We have provided data from 1 January to 31 December 2022.

Service area	Analysis
Outpatients	Our data shows that more females to males are accessing our Outpatients. The gender profile for Suffolk and Essex is approximately 50/50 which means that women are 16% more represented in our service user profile for this service. The largest group of service users accessing outpatient service are those aged 60 – 79 (they make up 34% of the service user profile). The data shows 79% of service users identify as White and 4% of our service profile BAME. 9% of our ethnicity data for service users is unknown. 49% of the service user data for religion and belief is unknown. Church of England denominations make up 33% of the data recorded and 3% are other faith groups. 25% of the data is unknown regarding the marital status of service users, 39% are married or in a civil partnership, and 26% are single.
Inpatients	Our data shows that more females to males are accessing our inpatient services. The gender profile shows that woman are 8% more represented in our service user profile for this service. The largest group of service users accessing inpatient service are those aged 60 – 80+ (they make up 55%) of the service user profile. The data shows 80% of the service users identify as White and 4% of our service profile BAME, indicating under presentation of BAME communities and 7% of our ethnicity data for service users is unknown. The faith profile for Inpatients is similar to that of Outpatients services with 50% of the service user data for religion and belief is unknown, 4% are not religious and Church of England denominations make up 34% of the data recorded.
A&E	Our data shows that slightly more females to males are accessing our A&E services. However, at a more proportional level the gender profile is 49% male and 51% female for this service, which is closer to our local demographics. The largest group of service users accessing A&E services are those aged 17 -39 (they make up 24% of the service user profile and this is distinctly different to other services). The data shows 77% of the service users identify as White, 5% of our service profile BAME indicating under presentation of BAME communities and 10% of our ethnicity data for service users is unknown. Again, the faith profile for A&E services is similar to that of Inpatient and Outpatient services, with 57% of the service user data for religion and belief being unknown, 3% are not religious and Church of England denominations make up 30% of the data recorded.

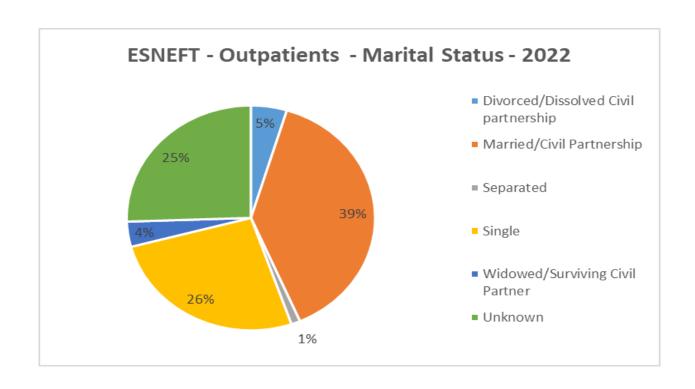
## Outpatients data – Analysis



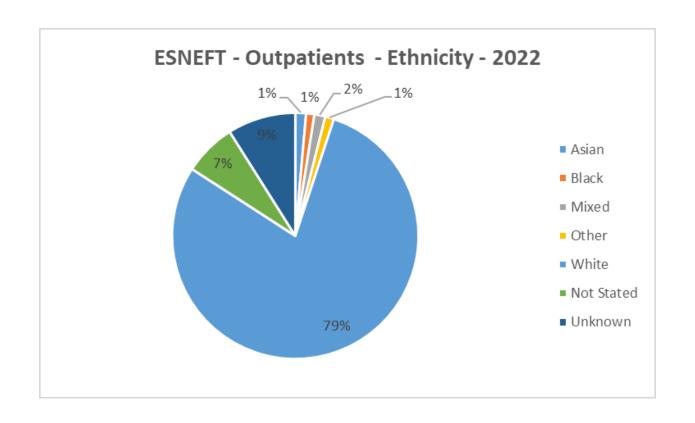
Outpatients	ESNEFT		
Genders	2021	2022	
Female	58.45%	57.9%	
Male	41.52%	42.09%	
Not Specified	0.03%	0%	
Unknown	0.00%	0.01%	



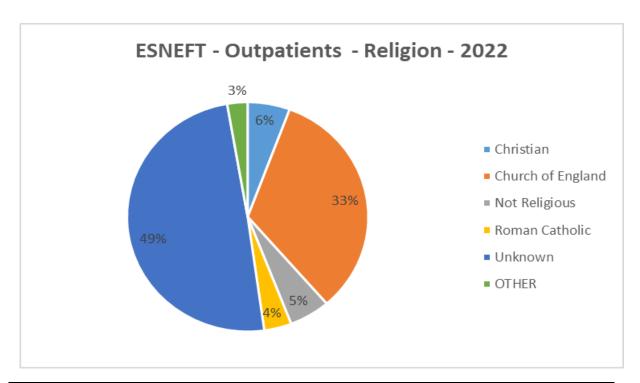
Outpatients	ESNEFT	
Age Band	2021	2022
<=16	11.76%	12.70%
17-39	21.18%	19.98%
40-59	19.38%	19.30%
60-79	34.13%	34.15%
80+	13.56%	13.87%



Outpatients	ESNEFT	
Marital Status	2021	2022
Divorced/Dissolved Civil partnership	4.83%	4.69%
Married/Civil Partnership	40.04%	38.85%
Separated	1.12%	1.18%
Single	26.79%	26.15%
Widowed/Surviving Civil Partner	3.82%	3.61%
Unknown	23.41%	25.53%

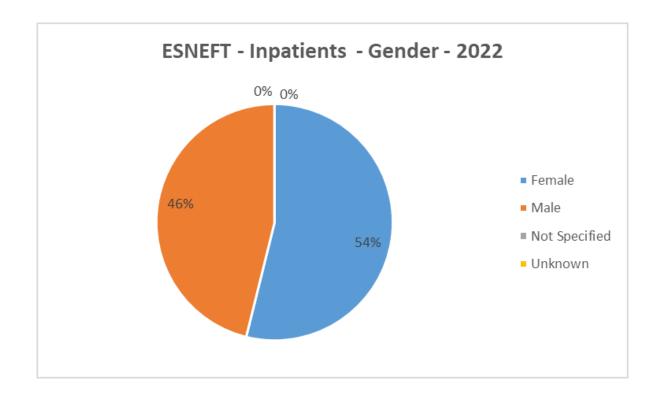


Outpatients	ESNEFT	
Ethnicity	2021	2022
Asian	0.90%	1.41%
Black	1.00%	1.09%
Mixed	1.29%	1.43%
Other	1.45%	1.15%
White	79.66%	79.07%
Not Stated	6.68%	6.91%
Unknown	9.03%	8.94%

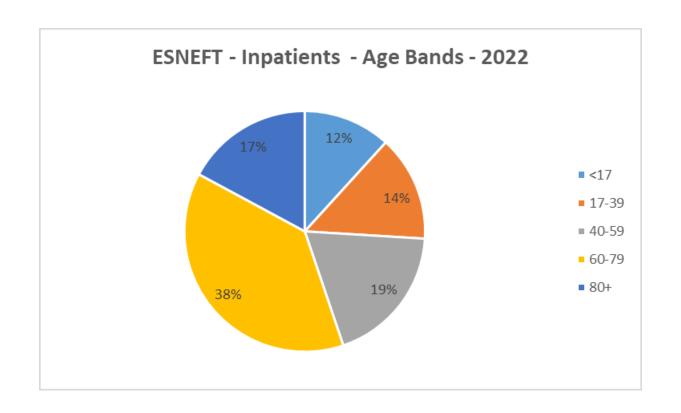


Outpatients	ESNEFT		
Religion - Grouped Categories > 1%	2021	2022	
Christian	3.13%	5.67%	
Church of England	33.96%	32.97%	
Not Religious	6.59%	5.49%	
Roman Catholic	3.79%	3.66%	
Unknown	31.14%	49.48%	
OTHER	21.38%	2.73%	

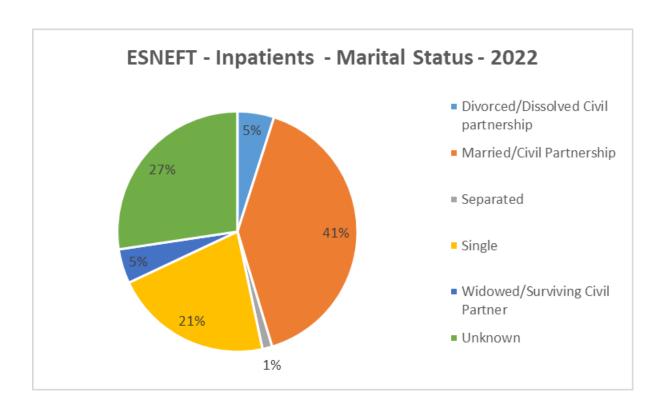
## Inpatients Data – Analysis



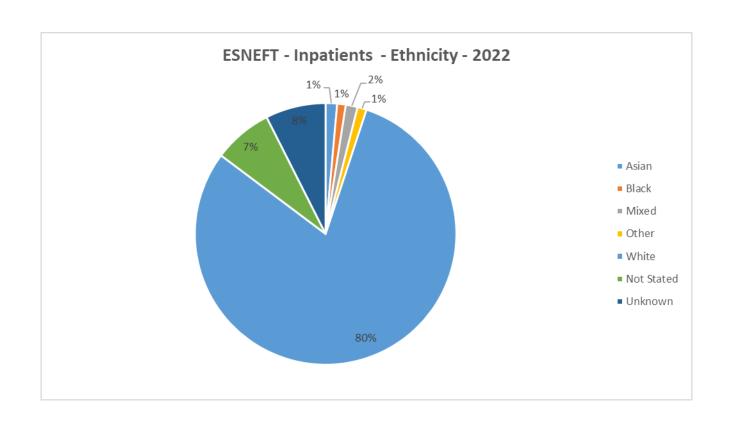
Inpatients	ESNEFT	
Genders	2021	2022
Female	53.68%	53.87%
Male	46.30%	46.12%
Not Specified	0.00%	0.01%
Unknown	0.02%	0.01%



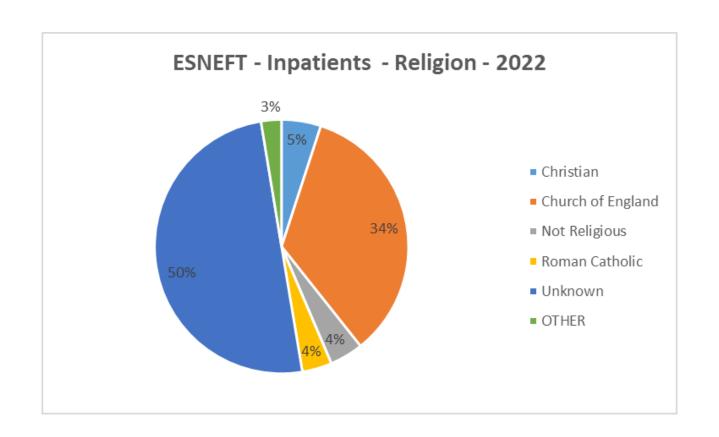
Inpatients	ESNEFT	
Age Band	2021	2022
<=16	11.44%	11.76%
17-39	14.46%	14.21%
40-59	18.77%	18.85%
60-79	37.94%	38.05%
80+	17.38%	17.13%



Inpatients	ESNEFT	
Marital Status	2021	2022
Divorced/Dissolved Civil partnership	5.38%	4.95%
Married/Civil Partnership	40.90%	40.38%
Separated	1.31%	1.32%
Single	21.60%	21.37%
Widowed/Surviving Civil Partner	4.66%	4.62%
Unknown	26.16%	27.36%

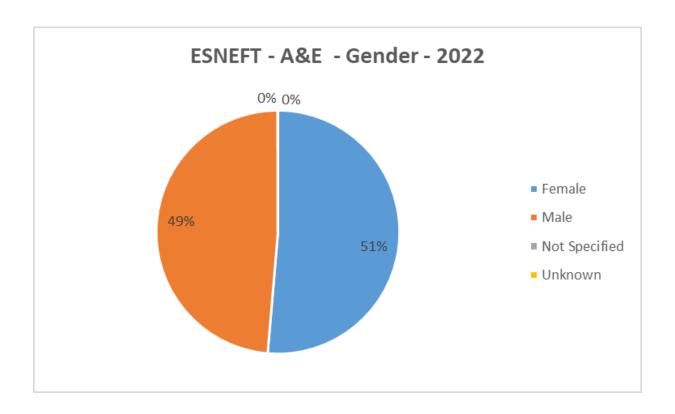


Inpatients	ESNEFT	
Ethnicity	2021	2022
Asian	0.85%	1.41%
Black	0.96%	1.06%
Mixed	1.41%	1.46%
Other	1.39%	1.13%
White	80.23%	80.17%
Not Stated	6.76%	7.31%
Unknown	8.40%	7.45%

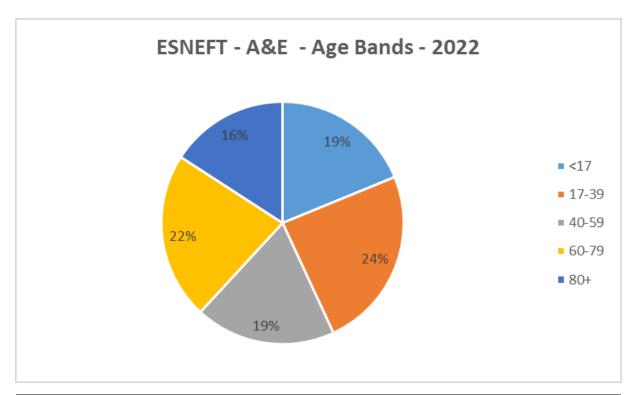


Inpatients	ESNEFT	
Religion - Grouped Categories > 1%	2021	2022
Christian	2.74%	5.01%
Church of England	35.82%	34.30%
Not Religious	5.12%	4.27%
Roman Catholic	3.75%	3.79%
Unknown	29.43%	50.03%
OTHER	21.38%	2.60%

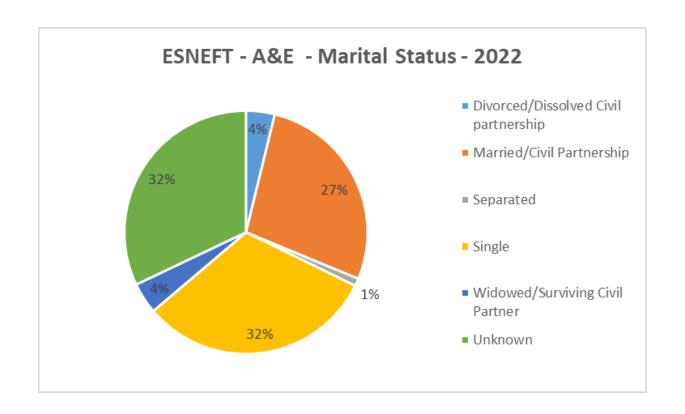
# A&E Data – Analysis



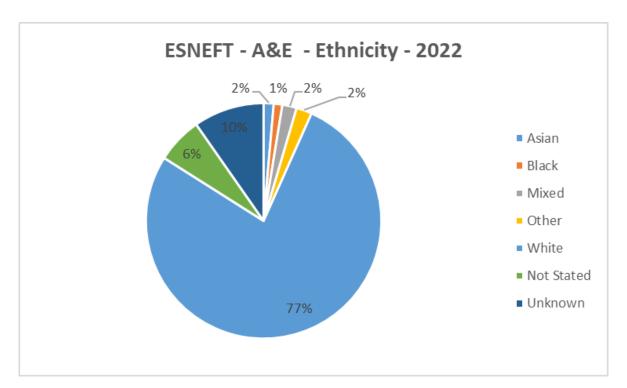
A&E	ESNEFT	
Genders	2021	2022
Female	51.54%	51.35%
Male	48.43%	48.64%
Not Specified	0.00%	0.01%
Unknown	0.03%	0.01%



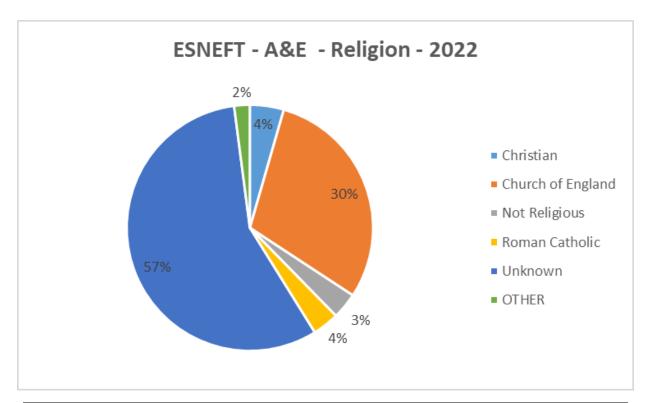
A&E	ESNEFT	
Age Band	2021	2022
<=16	17.52%	18.82%
17-39	24.58%	24.28%
40-59	19.56%	18.77%
60-79	22.31%	22.28%
80+	16.03%	15.85%



A&E	ESNEFT	
Marital Status	2021	2022
Divorced/Dissolved Civil partnership	4.06%	3.82%
Married/Civil Partnership	28.25%	27.43%
Separated	1.13%	1.01%
Single	31.61%	31.54%
Widowed/Surviving Civil Partner	4.17%	4.14%
Unknown	30.79%	32.06%



A&E	ESNEFT	
Ethnicity	2021	2022
Asian	0.94%	1.38%
Black	1.10%	1.18%
Mixed	1.86%	1.98%
Other	1.93%	2.14%
White	79.13%	77.31%
Not Stated	5.97%	6.31%
Unknown	9.07%	9.70%



A&E	ESNEFT	
Religion - Grouped Categories > 1%	2021	2022
Christian	2.58%	4.45%
Church of England	31.49%	29.80%
Not Religious	4.21%	3.43%
Roman Catholic	3.58%	3.48%
Unknown	30.61%	56.78%
OTHER	27.54%	2.05%

#### What We've Achieved During 2022

There has been considerable progress in a number of areas to support our EDI agenda over the past year. We have:

- Reviewed and refreshed our EDI Strategy 2021-24 so it remains a live document and relevant to the needs of our patients and colleagues.
- Reviewed key existing policies with an equality impact assessment (EIA) focus and strengthened the EIA form to support colleagues when reviewing
  existing or drafting new policies or implementing new projects to ensure EDI is considered and guidance provided to comply with the relevant areas of
  the Equality Act 2010;
- Established an EDI Data Group to design an EDI data dashboard which significantly improves the visibility and availability of EDI data in terms of
  monitoring and reporting of the data to understand the Trust's EDI position;
- Launched a Cultural Audit to assess a wider view on the lived experience of our staff which is now being triangulated with the National Staff Survey
  data which had Equal Opportunities data built in in order to assess across the 9 protected characteristics
- Further supported and established our Staff Networks and Cultural Ambassadors with protected time to work with colleagues
- Delivered bespoke training on Unconscious Bias, What is EDI, Allyship to Advocacy
- Launched our Leadership Development Pathway whose main three programmes, for differing levels of staff, have module three dedicated to Compassionate Cultures
- Delivered a successful initial cohort of Nottingham University's ReMEDI programme where colleagues from our EMBRace network mentored our Executive and Non-Executive Teams
- Established focused EDI Steering Groups where priorities were identified to promote better inclusion
- Reviewed the purpose and Terms of Reference of the Trust wide EDI Steering Group
- Achieved Disability Confident Employer (level 2) and launched PurpleSpace for colleagues
- Committed to the NHS Rainbow Badge Assessment Programme

#### Our Approach Going Forward

We are working to ensure that self-reported data is available to better understand any key issues relating to our patients and staff. We are constantly thinking of new ways to engage with our diverse workforce and the local population and we aim to do this by:

- · making it easy for people to access our services
- strengthening our recruitment and selection processes and retaining our staff from all communities, backgrounds and protected characteristics
- making sure our staff and those who use our services are valued and respected as individuals
- making sure everyone is treated fairly and honestly.

#### **Service Users**

There is a greater demand for interpreters and ongoing work is taking place with DA languages to ensure there are appropriate interpreters in place to support our patients, their loved ones and carers to keep them safe and comfortable whilst visiting our hospital and community services. We are also looking at using our staff to support at short notice for patients that need interpreters. Work is progressing well with DA languages and there is much more support in place for our patients and their loved ones.

Work continues with our IT colleagues to continue the integration of the Accessible Information Standards in the Trust's IT systems to support patients and service users in accessing care services appropriate to their communication requirements. The patient portal is supporting this work along with the EPR that will be implemented in the future.

The Trust monitors complaints and PALS incidents to establish whether there are trends, from an equality perspective, which need to be addressed. No person who makes a complaint will be discriminated against on the grounds of religion, gender, race / ethnicity, disability, age or sexual orientation or because they have made a complaint. Complaints and concerns are dealt with in a fair and flexible manner, encouraging open communication between all parties. High standards of conduct are expected from all staff at all times to ensure that service users/representatives will be treated respectfully, courteously and sympathetically, and the requirement to maintain confidentiality during the complaints process will be absolute. Complainants and service users are now part of the membership for the 15 steps programme whereby wards, departments and community sites are visited and findings shared across the organisation.

The Trust is committed to listening to our service users through Complaints, PALS, NHS choices, FFT, local and national surveys, coffee mornings, focus groups and by working with external partners through co-production. The involvement of local communities underpins everything we do. We actively seek to involve patient and public in our decision-making. The patient experience team have actively invited governors and patient representatives to events at the hospital including the simulation centre at Ipswich Hospital, co-production training with Healthwatch Suffolk, Essex Carers and Suffolk Carers and 15 Steps Programme. Through established dialogue with service users, carers and the wider community the Trust continues to keep the service users at the heart of everything we do.

For the remainder of 2023, protected characteristic groups who are accessing our services commit the Trust to looking at service user profile. The Trust will continue to involve public, patients and servicer users in developing its services and influencing the strategic direction of the organisation.

The Patient Experience Group continues to meet every other month and a priority for 2023 is to ensure that our patient groups had better represent the diversity of the communities we serve.

A patient experience and staff experience story is presented at every Board of Directors meeting and Patient Experience Group.

#### Workforce

Over the next year, the Trust will continue its focus on embedding equality, diversity and inclusion into its business as usual activity. Our ambition is to move beyond compliance to achieving excellence across the Equality Diversity Inclusion agenda.

The Trust's **Equality, Diversity and Inclusion Strategy,** incorporates our key workforce priority areas and the ongoing embedding of the Trust's OAK Values (Optimistic, Appreciative and Kind) and our Trust philosophy of 'Time Matters'. We will be working with our Staff Networks on how we build intersectionality into our work plans going forward and continue to work towards creating an inclusive culture where everyone is valued and treated with dignity and respect. The priority areas are:

- Inclusive leadership and culture: Continuing to develop and promote our Leadership Development Pathway to ensure we create a community of leaders who take personal and collective responsibility to inspire and influence inclusive behaviours within the organisation and work confidently and compassionately in and across ESNEFT and the wider system. Embed a sustainable EDI training offer to include Talk to Transform, LGBTQIA Awareness, leading in Allyship, Inclusive Recruitment and Selection programmes. Alongside our Reverse Mentoring support colleagues to access EDI focused national programmes including the NHS Leadership Academy's Stepping Up and Ready Now programmes as well as Imperial College NHS Trust's Calibre programme.
- Compliance management: Strengthening our governance and our approach to embedding EDI across our systems, processes, projects and reporting to create better oversight and in turn produce positive change. Continued review and monitoring of our progress on our strategic objectives and delivery of our statutory obligations across the Workforce Race Equality Standard and Workforce Disability Equality Standard, Gender Pay Gap and the Public Sector Equality Duty
- **Involvement and engagement**: Widening participation by seeking out diverse stakeholders from underrepresented groups within our workforce.. Developing the roles of our Assistant Freedom to Speak Up Guardians and RCN Cultural Ambassadors so that staff are provided with a psychologically safe environment to raise concerns and to ensure our recruitment and employee relations processes are fair and equitable.
- Data collection and analysis: Using our newly formed EDI Data Group to identify improvements in the capture, reporting and visibility of data to inform decision making, design of interventions and support for our workforce. Data collection will also include recruitment data. The Trust currently has four established staff networks in place in order to support our Ethnic Minority Groups, LBGTQ+ community, disabled staff and Armed Forces in order that underrepresented groups are supported to reach their full potential and the organisation is kept informed of inequities these groups may be experiencing.
  - **EMBRACE** (Equality in Moving beyond Race) supports ESNEFT in its objectives to make the organisation a great place to work, in order that every member of staff regardless of ethnicity, cultural background or nationality, feels included

- **LGBQTIA**, representing the interests of LGBTQIA staff and patients. The network aims to engage in positive change in the workplace, which will allow all LGBTQIA staff to excel in a supportive and non-discriminatory work environment.
- **ESNABLE** represents staff with disabilities providing advice and support to ensure all staff are treated equally and fairly, raising awareness of a broad range of disabilities and helping to inform reasonable adjustments processes to ensure staff feel safe with a sense of belonging, and are equipped and empowered within their roles.
- **Armed Forces Network** gives staff the chance to come together, share ideas and support each other to make our Trust an even better place to work, train and receive care. It recognises the valuable contribution which the armed forces community makes to our colleagues and patients, and the vital skills, knowledge and experience they bring to ESNEFT.

These networks will continue to be supported by the organisation and actively involved and engaged in the decision-making and key activities of the Trust. Staff Network leads now have been allocated protected time to work on network business and are supported up to one day per week with a staff Network Administrator.

The Trust continues to make good progress on performance in our Statutory Reporting Obligations and Annual Reports and Action Plans can be accessed at: Equality, diversity and inclusion - East Suffolk & North Essex NHS Foundation Trust (esneft.nhs.uk).

#### Conclusion

This report has provided key findings from our equality data for staff and service users and provides assurance that we are committed to complying with our PSED duties as outlined in the Equality Act 2010.

We will continue to ensure our equality, diversity and inclusion work plan is aligned to our EDI data to identify areas of concern and tailor appropriate actions for implementation. We will continue to work on disclosure of equal opportunities data with our Workforce team to ensure we fully understand the make-up of our workforce as well as promoting psychological safety where staff feel able to disclose and be their authentic selves at work.

We are committed to ensuring compliance with equality legislation and specifically meeting Public Sector Equality Duties. We will continue to progress with the delivery of the Trust's Equality Objectives 2021 – 2024. We are committed to implementing NHS Equality Workforce Standards, the EDS2 and the Accessible Information Standard, and we will be commencing work towards implementing the Sexual Orientation Monitoring Standard.