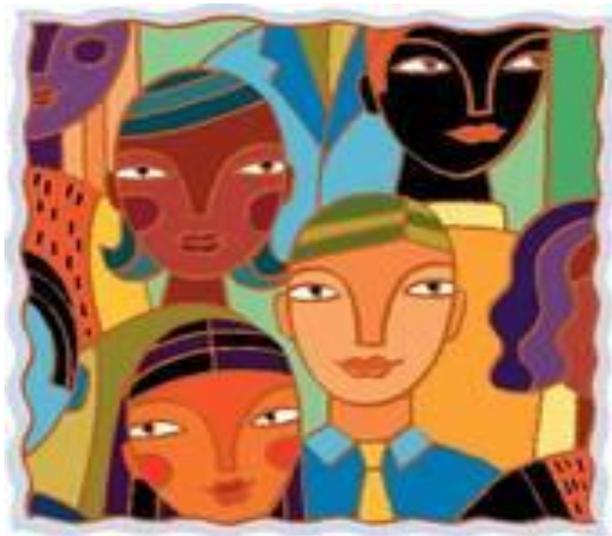




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Bwrdd Iechyd Prifysgol  
Abertawe Bro Morgannwg  
University Health Board

# Strategic Equality Plan 2012 – 2016



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and other languages on request

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**Approved by:** ABM University Health Board – May 2012

**Date Endorsed by**

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**Review Date:** Objectives and actions will be reviewed annually

# Strategic Equality Plan 2012 - 2016

## Foreword

We are pleased to present our first Strategic Equality Plan and welcome our duty to promote and deliver equality, diversity and human rights in all that we do. We have, over many years, worked to demonstrate our commitment to ensuring equality for everyone as a provider of health care services and as an employer.

The next few years will be challenging as we respond to unprecedented financial pressure, new medical technologies, a changing workforce, different health issues and large scale, complex change. At all times we need to work hand in hand with our community, its public services partners, our volunteers and our employees to ensure ABM University Health Board offers effective and equitable care that is as good as can be found anywhere in a 21st Century NHS.

By adopting a human rights-based approach every human being is an individual with rights and freedoms. You should not be put at a disadvantage because of your gender, race, faith, belief or non-belief, disability, sexual orientation, age, or because you are married or in a civil partnership, pregnant or on maternity leave, considering, undergoing or have undergone gender reassignment.

As a provider of healthcare services, we believe that equality is about providing personalised care based on an individual's needs. It is about treating everyone with the dignity and respect they deserve, particularly the more vulnerable patients in our care including older people and people with disabilities. It means putting arrangements in place to communicate with patients who have specific needs, including people unable to communicate in English, people with sensory loss, people with dementia and people with learning disabilities.

As an employer, we believe that equality means creating a fair working environment where no one is held back because of who they are, or where they come from. This could be about putting reasonable adjustments in place for members of staff with disabilities to ensure they are not disadvantaged.

From a personal perspective, equality is something that touches everybody's lives. It could be your elderly relative, your child on the ward who needs help quickly from staff to ensure their essential care needs are met in a timely manner. The more we see the patient in front of us as being potentially those close to us the more we can personalise and improve care.

We would like to thank everyone who has taken the time to provide their views, ideas and feedback. These have directly shaped our priorities for action and form the basis of our three outcomes and objectives within our Action Plan.

Signed by  
Win Griffiths OBE  
Chairman

Paul Roberts  
Chief Executive

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## **1. Introduction to ABM Health Board**

Abertawe Bro Morgannwg (ABM) University Health Board came into being on 1<sup>st</sup> October 2009 as a result of a reorganisation within the NHS in Wales and consists of the former Local Health Boards (LHBs) for Swansea, Neath Port Talbot and Bridgend and also the Abertawe Bro Morgannwg University NHS Trust. ABM Health Board covers a population of approximately 600,000. Our budget stands at £1.3 billion and we employ around 16,000 staff. We are responsible for the provision of primary and integrated secondary care hospital services, mainly for the residents of Swansea, Neath Port Talbot and Bridgend. The Health Board has four acute hospitals providing a range of services, which are Singleton and Morriston Hospitals in Swansea, Neath Port Talbot Hospital in Port Talbot and the Princess of Wales Hospital in Bridgend.

We act as the service provider for Wales and the South West of England in respect of Burns and Plastic Surgery. Forensic Mental Health services are provided to a wider community, which extends across the whole of South Wales, while Learning Disability services are provided from Swansea to Cardiff. A range of community based services are also delivered in patients' homes, via community hospitals, health centres and clinics.

We contract with independent practitioners in respect of primary care services, which are delivered by GPs, Opticians, Pharmacists and Dentists. There are 77 general practices across ABM. We manage two practices in the Neath Port Talbot area: in the Afan Valley and Neath town centre. All other practices are independent, self-governing organisations. Practice list sizes vary across the area, with the lowest approximately 1000 patients and the highest 20,000 patients.

In 2010 the seven Local Health Boards in Wales established the Welsh Health Specialised Services Committee (WHSSC) to ensure that the population of Wales has fair and equitable access to the full range of specialised services.

During 2010/11, the Welsh Government led the development of a new model for shared services (non clinical business functions undertaken by Welsh NHS organisations, such as procurement, estates management, legal services, payroll and recruitment services). The new model, managed through a NHS Shared Services Partnership, has responsibility for setting policy strategy and monitoring the delivery of NHS Shared Services. One of the key benefits of the new arrangements, which came into force from April 2011, is that NHS organisations are able to concentrate on providing front line services without the distraction of running non clinical functions.

We work in partnership with Swansea University, Swansea School of Medicine, the School of Health Science and the Institute of Life Science, with the aim of ensuring excellent health and medical care in our region.

We have continued to play host to the Welsh Government's National Leadership and Innovation Agency for Healthcare, the Centre for Equality and Human Rights and the National Delivery and Support Unit. We maintain, also, a business interest in ZooBiotic Ltd, which was 'spun out to promote the clinical benefits of maggot therapy'.

## 2. Our Purpose as a Health Board

'The purpose of ABMU Health Board is to improve the health of our community and to offer effective and efficient healthcare in which our patients and users feel cared for, safe and confident.'

Thinking about equality, we will achieve this through:

- Engaging with you and local organisations
- Provide excellent quality and safe healthcare, which is centred around your particular needs
- Ensure that there is fair and equitable access to care and that you are treated with dignity and respect at all times
- Enable our members of staff to have the training, skills and experience to deliver personalised care now and in the future.

## 3. Our Ambitions and Values

Our Ambition

Underpinning all that we do is the "One Wales" ambition to "transform Wales into a self-confident, prosperous, healthy nation and society, which is fair to all". The Welsh Government is committed to improving the quality and length of life and to ensuring that everyone in Wales has a fair chance to lead a healthy life – adding life to years and years to life is our challenge. As part of this commitment, the delivery of equality through achieving better outcomes for all, being a 'first choice' employer and improving patient access and experience will be among our priorities.

Our Values

We aim to ensure that we contribute to a fairer society through advancing equality and good relations in our day to day activities. This is underpinned by our values:

- **Delivering Excellence** - We will work to the best of our ability, be purposeful in what we do and focus upon delivering equality and equality of opportunity
- **Treating Others with Dignity and Respect** - We will treat others fairly and demonstrate respect and dignity in our relationships.
- **Working as a Community** - We will strive to build relationships with our staff and others that are honest and open, even when our conversations are difficult and challenging

## 4. Our Human Rights Based Approach

In developing our Strategic Equality Plan, we have adopted a human rights-based approach, which respects that every human being is an individual with individual rights and freedoms and entitled to be treated with and dignity respect at all times. Our approach focuses on everyone within our communities, especially where you are most vulnerable, excluded or discriminated against and is based on the following key human rights principles of:

- Equality and non-discrimination

- Participation and involvement
- Accountability and transparency
- Dignity and respect

We know that your rights are indivisible, interdependent and interrelated and apply to all of you equally. This includes your right to participate in our decision-making processes, as these affect your lives, health and well-being, which we are fully committed to.

## **5. Why do we need a Strategic Equality Plan (SEP)?**

The Equality Act 2010 (the Act) brings together and replaces the previous anti-discrimination laws with a single Act. It simplifies and strengthens the law, removes inconsistencies and makes it easier for people to understand and comply with it.

The Act sets out a new public sector equality duty 'the general duty', which requires us to have due regard to the need to:

- Eliminate unlawful discrimination, harassment and victimisation
- Advance equality of opportunity between different groups
- Foster good relations between different groups

The 'general duty' covers the following 9 protected characteristics:

- Age
- Gender reassignment
- Gender
- Race
- Disability
- Pregnancy and maternity
- Sexual orientation
- Faith, belief/ non-belief
- Marriage and Civil Partnership

The Act provided for Wales to set its own 'specific duties', which came into force on 6 April 2011. The 'specific duties' set out the steps that we (as a public authority) must take in order to demonstrate that we are paying due regard to the 'general duty'. There are 14 specific duties, including the development of a Strategic Equality Plan and Equality Objectives. The specific equality legislation and Act is outlined in Appendix 1 and 2.

## **6. What is the Purpose of a SEP?**

The purpose of a Strategic Equality Plan is to document the steps we are taking to fulfil our specific duties.

## **7. What is our SEP?**

Our SEP is a four year high level plan, which sets out our corporate vision and commitment to delivering equality and human rights. Our Plan is a 'living document', which will be reviewed annually and changed in accordance with what you tell us we are doing well and what we can do better.

Our approach has been to build on work already started, where we will continue to design services around our patients and treat all our employees with dignity and respect. Our Plan has been heavily informed and influenced by engaging with our communities and members of staff, where we have ensured that we provide feedback at any opportunity.

Our Plan is influenced by the Welsh Government's 'Together for Health' ( A Five Year Vision for the NHS in Wales), 'Changing for the Better' (our Five Year Strategic Plan) , our Health, Social Care and Well Being Strategies, our Homeless and Vulnerable Groups Action Plan, our Annual Operational Plan and our Patient Experience Strategy 'A Positive Experience'.

Our accompanying action plan will outline how we will put our commitment into practice and continue to build on existing progress made. This action plan is a 'live' document and will be continuously reviewed and updated in year and year on year to support delivery of our Strategic Equality Objectives by 2016.

The **purpose** of our Strategic Equality Plan is to:

- Achieve better health outcomes for all, through reducing health inequalities, making fair financial decisions and being committed to ensuring that equality is at the heart of everything that we do
- Ensure that we provide improved patient access and experience in an environment where dignity, individuality and preferences are respected and needs met
- Provide a framework, which ensures that all our employments practices and opportunities are fair, transparent and accessible.

## **8. How will we 'Make Equality Happen'?**

Over the next four years we will fulfil the aims identified in our SEP and the health outcomes and objectives set out in our action plan by:

- Effectively implementing the new initiatives and actions identified in our Action Plan
- Making our Plan publicly available to enable ongoing communication about promoting equality
- Being committed to ensuring that equality is at the heart of everything that we do
- Making fair financial decisions, which influence our everyday work
- Empowering our staff through a process of learning, development and education, which is supported by tools and processes
- To continue to work closely with all our stakeholders and engage meaningfully with all our communities

- Monitoring our progress
- Reporting annually to the Board, and
- Publishing the report in an accessible way

## **9. Our Accountability**

We will be accountable for our commitment to equality and our performance in achieving our aims, by:

- Publishing our Plan on our website, along with all the supporting documents
- Publishing the results of completed assessments of impact, which show substantial negative impacts
- Publishing our workforce monitoring data, which is updated annually
- Developing an 'Easy Read' version of our Plan [for distribution in hard copy]
- Translating our Plan into alternative languages and formats on request

## **10. Our Roles and Responsibilities**

We take the approach that promoting and delivering on equality is every member of staff's responsibility. To help us achieve this we have an Equality Team within our Workforce and Organisational Development Directorate, which provides strategic and operational support across the Health Board, and in particular, to our Equality, Diversity and Human Rights Strategic Group. Their role focuses on supporting us to ensure that equality is at the heart of all that we do and that we meet our legal duties, as a minimum, and continually promote best practice.

## **11. Equality, Diversity and Human Rights (EDHR) Strategic Group**

Our EDHR Strategic Group:

- Sets the strategic direction for equality, in accordance with our core values and beliefs, and in compliance with all relevant equality and human rights legislation.
- Is the main vehicle for integrating equality across our organisation. This will be achieved by providing regular briefings and reports to the Health Board, Executive Board and the Quality and Safety Committee and monitoring and reviewing our implementation of equality
- Strives to achieve this, while carrying out its functions and responsibilities as a service provider and employer.

## **12. Equality and Leadership**

We are committed to ensuring strong and consistent leadership for equality. Our Chief Executive, Chairman and Director of Workforce and Operational Development are active champions of equality, who bring a passion and creativity to performance management, service development and service delivery. They assure the Board in relation to equality, diversity and human rights.

Our Chairman is the chair of the EDHR Strategic Group, which has been reconstituted to ensure that there is senior representation from all Directorates,

Localities and Corporate Departments within ABMU. He also chairs our Disability Equality Sub Group, which identifies service improvements that would have the biggest impact on their lives of disabled people.

As part of the 1000 Lives campaign, our Executive Directors and Non Officer Members visit clinical areas several times a month, signalling to frontline staff the commitment to our values through face to face meetings with the leadership of ABM. They observe and report on a number of key issues, including patient safety, privacy and dignity in care.

As well as 'high level' leadership and a Board that takes an active role in providing challenge and ensuring that equality issues are addressed we will continue striving to foster a 'culture' of Equality Champions at all levels within ABMU. We have a Non Officer lead as our 'Age Champion', who has set a precedence of enthusiasm and going 'above and beyond' to deliver equality through a 'can do' attitude.

In addition, each Directorate is responsible for putting equality at the heart of their everyday work and for delivering on specific elements of the SEP Action Plan

### **13. Engaging with You**

One of our key objectives is to ensure that patient experiences shape our existing and future services. One of our priorities for action is to ensure that we engage and involve patients as we plan and implement service change.

People and communities are essential to the success of achieving the ambitions set out in our Plan.

Engagement can help us:

- prioritise which objectives are most likely to make the biggest difference to tackling inequality
- identify particular needs and improve the design and delivery of services.
- identify needs, patterns of disadvantage and poor relations between groups and the reasons for them
- obtain evidence to inform our objectives where other forms of information may not be available
- identify where our activities may disadvantage people wishing to use our services and members of staff and working environments
- monitor our performance on delivery of our objectives

Our engagement aims to:

- improve our ability to communicate, consult and engage with you
- demonstrate clearly staff, patient and public involvement in decision-making, influencing service change and service development

Improvement is about changing the way that we do things to make sure that we continue to develop and deliver services that meet your individual needs. We cannot do this without you, so we will continue to seek your views about our overall approach to equalities issues and implementation of our Plan. We will do this by involving you throughout the life of our plan and drawing upon your knowledge and

experiences to achieve shared aims and to deliver better decision-making, for example, in policy and service development and in setting priorities for action.

Although we have a long legacy of community and staff engagement for equality in health, social care and employment practices and opportunities, we want to ensure that we build on this, which includes, for example, working more closely with 'hard to reach' groups. See Appendix 3 for the groups and organisations that we work with.

## **14. Gathering the Evidence to Develop our Objectives**

The evidence that helped us to focus our equality objectives on areas where we are aim to bring about positive change is contained in the accompanying ABM document 'Evidence Base for Equality Objectives'. It contains:

### **National Research**

National research is important in providing a starting point for identifying inequalities we may have within our localities. We have noted some of the key issues and conclusions of a range of national research undertaken in more recent years, which has been used to inform our SEP.

### **Local Information**

Local information has also informed our thinking. Much of this information is useful in identifying where national equality issues may be evident within our localities and where local issues may not be reflected nationally.

### **Information from Engaging with our Staff, Service Users and Communities**

Your experience of our services and what it is like to be a HB employee is a vitally important source of information and we are continually improving the way in which we listen to and respond to you when you tell us your experiences. To gain this information to support the development of our objectives we used:

- Internet: Our consultation documents were posted on the front page under the Public Engagement tab.
- Intranet: Published consultation documents as the first item under Hot Topics. A bulletin was posted at the start of the consultation and towards the end to encourage staff to submit their comments
- On-line Engagement: The social networks Facebook and Twitter were used to encourage the involvement of those who like to participate in these forums.
- Existing Forums: A member of ABM Equality Team attended meetings of existing forums to get comments from groups who have an interest in the way we carry out our public functions. This included the Health Board's Stakeholder Reference Group, Disability Reference Group, Patient Experience Involvement Groups and Equality Forums. The consultation was also raised at ABM Partnership Forum with staff side colleagues.
- E-mail: The consultation documents were e-mailed to organisations representing the interests of a particular group to invite their comments. These included locally based organisations and groups (e.g. Swansea Bay Regional Equality Council) to larger regional organisations (e.g. Stonewall Cymru).
- Information Stalls: Information stands were set up lunchtime in the canteens of the Princess of Wales, Neath Port Talbot, Singleton, Morriston and Cefn Coed

Hospitals. A member of the Equality Team and the Welsh Language Officer manned these stands.

- Staff Training Courses: Every opportunity was taken to seek staff participation as part of equality and diversity training delivered during the period of consultation.

The information and feedback that we have received from these engagement activities have been used to inform the development of our equality objectives and Strategic Equality Action Plan, found in the document titled 'Feedback from Consultation on Equality Objectives'.

## 15. Developing our Equality Objectives

We are all responsible for delivering equality and equality of opportunity. To help us achieve this, we have looked to the 'Equality Delivery System (EDS)' for the NHS and the use of 'Driver Diagrams'.

The EDS is a tool designed to be used to help us all understand how equality can drive improvements and strengthen the accountability of services to patients, the public and staff.

Driver Diagrams are a powerful 'live improvement' tool that helps us to translate our high level 'equality outcomes and objectives' into realistic and practical equality actions. They provide a measurement framework for monitoring our progress and will change in line with our annual reviews to ensure that we continuously respond to your health care needs. Evidence has shown that major improvements often begin with very small but significant changes.

In using Driver Diagrams there are **three** key questions that we have to ask ourselves to make sure that we can improve:

1. What are we trying to achieve?
2. How will we know that a change will be an improvement in how we develop and deliver our services?
3. What change can we make that will improve what we do?

**We** cannot achieve these without **your** help.

We have taken this approach in using an improvement tool as we want to ensure that we deliver better outcomes for patients and communities, where we can shape our services around our patients' specific circumstances and provide better working environments for our staff.

This approach helps us ensure that our equality objectives and associated actions will feed into all our patient and workforce initiatives, and be reported and acted on through our decision-making and business planning processes.

Appendix 4 sets out 12 equality objectives, which includes an objective to explore 'pay' differences'. The specific statutory requirement is to address 'gender pay' differences, but our objective to 'ensure levels of pay are determined fairly for all posts' relates to all the protected characteristics and not solely gender.

## 16. Our Three Equality Outcomes

### 1 Better Health Outcomes

- Reduce health inequalities
- Embed equality into our service delivery
- Make fair financial decisions

### 2 ABMU to be a First Choice Employer

- Support workforce to be and remain healthy as well as promoting staff well being
- Promote a working environment free from abuse, harassment, bullying and violence and discrimination
- Support staff to be confident and competent to carry out their work
- Increase diversity and quality of working lives of the workforce
- Ensure levels of pay are determined fairly for posts

### 3 Improved Patient Access and Experience

- Raise awareness of equality and human rights
- Treat patients with dignity and respect
- Ensure patients have equity of access to services
- Improve services through community engagement and patient feedback

## 17. Assessment of Impact - Our Approach

The Equality Act 2010 requires us (as a public body), to undertake Assessments of Impact on existing and proposed 'business activities' (i.e. policies, practices, procedures and service improvements/developments). These will need to include and address an existing or potential impact on human rights and all nine protected characteristics.

This is a tool, which we will use to help us make fair financial decisions and to improve the equality and equity of our health care services. We will achieve this by ensuring that we think carefully about the potential impact of our work on different communities, groups, staff and service users.

We use an **Assessment of Impact Toolkit**, which was developed last year through a sub group of the EDHR Strategic Group. The sub group also produced **Management Guidance** on how to assess the impact of any planned policy or service. The toolkit and guidance covers all the protected characteristics and is used by the person who is leading on the service change/review/policy that is being proposed.

Our Equality Team provides any advice and support when it is requested. Assessments of impact have been embedded into our planning process and the assessment guidance forms part of the overall guidance for managers on how to develop a business case.

## **18. Health Care Standards (HCS)**

HCS are at the heart of the 5-year strategic framework for the NHS and key to underpinning the vision, values, governance and accountability of the new NHS Wales. They aim to continually drive improvement in the quality and experience of health care services and care that we have a reasonable right to expect. (See Appendix 5)

We have embedded HCS requirements for equality within our Plan that focuses on:

- Challenging discrimination, promoting equality, respect and human rights
- Providing evidence that staff and patients are treated with dignity and respect,
- Ensuring that care is planned and delivered in a way, which reflects the views and needs of the communities that we serve
- Narrowing health inequalities through partnership working and evidence-based policies and practice

## **19. Publication**

We will publish our first SEP, Action Plan and supporting documentation on our internal and external website, by 2 April 2012. These will be accessible to all members of our communities and will be available in Welsh and English. We will, also, make these available in alternative formats and other languages as is reasonably practicable to do so. We will also publish an annual report, which will set out:

- the steps we have taken to identify and collect relevant information and how we have used this to meet our equality duties
- any reasons why we may not have collected relevant information
- our progress towards achieving our equality objectives
- our employment information, including information on any gender or other pay differences, with regards to professional group, pay bands and full/part time employment.

## **20. Monitoring, Review and Evaluation**

We will review our progress annually as this will help us to decide whether we need to revise our objectives or change the actions we are taking to implement them.

Our review will be informed by information that we receive from you about your experiences in accessing and using our services and from local and national reports.

Once we have this information we will be able to evaluate our progress against our objectives and Plan and may need to make changes to these to enable us to continue to deliver better outcomes for patients and communities. We will be able to shape our services around our patients' specific circumstances and provide better working environments for our staff.

We will review our SEP and equality objectives every four years, in accordance with statutory requirements.

### Equality Legislation

#### Equality Act 2010

The Act brings together all the various strands of discrimination legislation into one single piece of legislation. The Equality Act streamlines, replaces and strengthens previous equalities legislation (with exception to the Human Rights Act). The Act introduces a '**General Equality Duty**', which requires public bodies to:

- a) eliminate unlawful discrimination
- b) promote equality of opportunity
- c) foster good relations between people who share a protected characteristic and people who do not share it.

The 'protected characteristics' are:

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

The Act provides for devolved Governments (e.g. Wales) to develop '**Specific Duties**' to meet the requirements of the General Duty. The Wales specific duties came into force on 6 April 2011 and cover:

- Equality Objectives
- Strategic Equality Plans
- Engagement
- Assessing impact
- Equality information
- Employment information
- Pay differences
- Staff training
- Procurement
- Annual reporting
- Publishing
- Welsh Ministers' reporting
- Review
- Accessibility

## **Strategic Equality Plans**

### **What the specific duty requires on Strategic Equality Plans (SEP)**

A public body must:

- draw up and publish an SEP by 2 April 2012

This must include:

- a description of the authority
- its equality objectives (including pay objectives)
- the steps it has taken or intends to take to meet its objectives and in what timescale
- its arrangements to monitor progress on meeting its equality objectives and the effectiveness of the steps it is taking to meet those objectives
- its arrangements to identify and collect relevant equality information. This includes information gathered from engaging with protected groups about how the work of an authority may relate to the general duty. It also includes any information about pay differences related to a protected characteristic and the causes of these differences
- its arrangements for publishing relevant equality information that it holds and which it considers appropriate to publish
- its arrangements for:
  - assessing the likely impact on protected groups of any policies and practices that an authority is proposing, reviewing or revising
  - monitoring their actual and ongoing impact
  - publishing reports where an assessment shows a substantial impact (or likely impact) on an authority's ability to meet the general duty
- details of how an authority will promote knowledge and understanding of the general and specific duties among employees, including through performance assessment procedures to identify and address training needs
- an action plan relating to gender pay objectives (see 'Gender pay differences' above)

It is open to the public body to include in its SEP any other information relevant to meeting its general duty.

In preparing and revising its SEP the public body is required to engage appropriately and have due regard to relevant equality information.

## **Appendix 2**

### **The Human Rights Act 1998**

The Human Rights Act (HRA), which is contained within the European Convention of Human Rights, came into force within the United Kingdom on 2 October 2000. The Act makes it unlawful for a public authority to breach Convention rights, unless sanctioned by an Act of Parliament. The Act sets out the fundamental rights and freedoms that individuals in the UK have access to within a set of 'Articles, as follows:

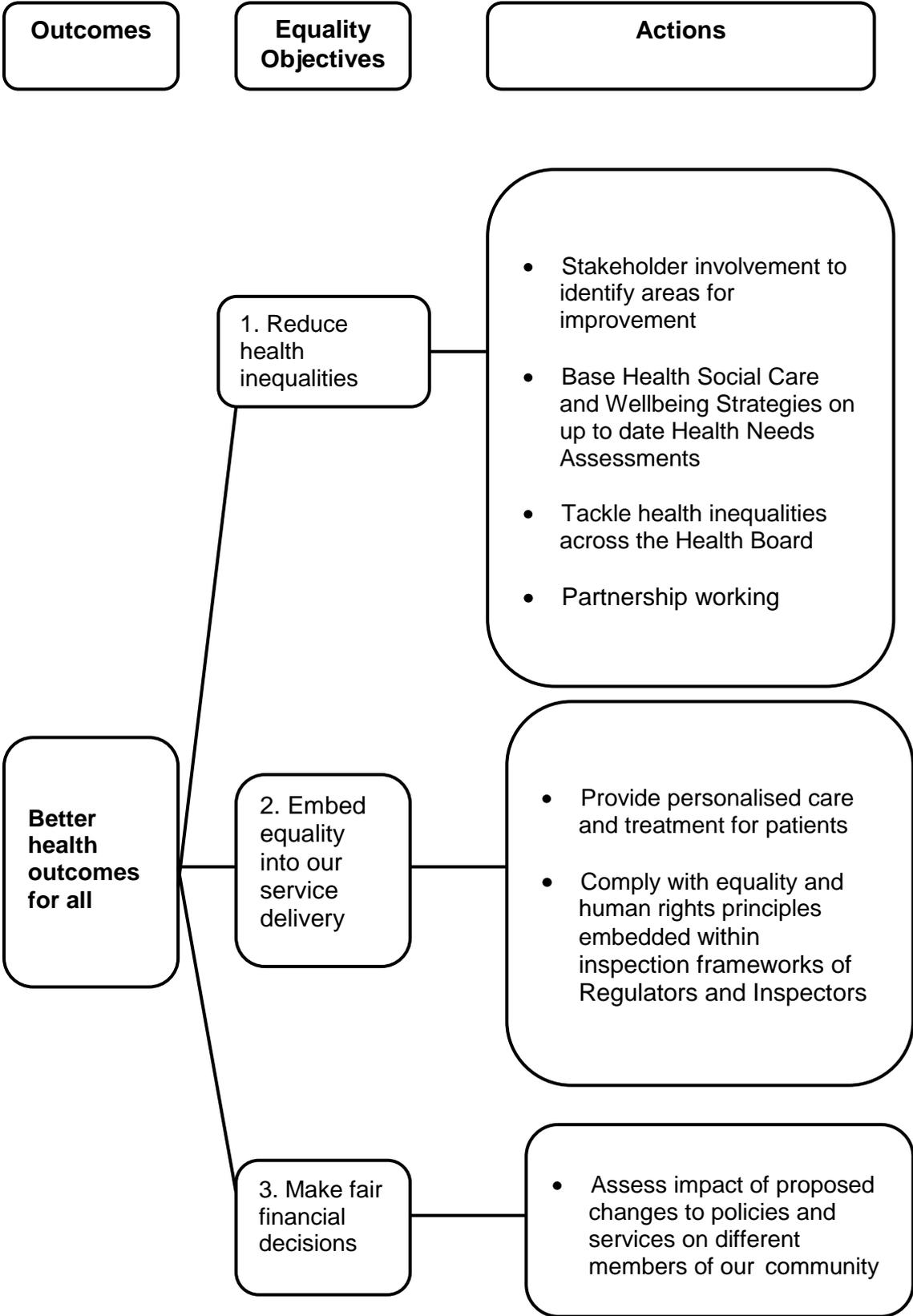
- Right to life
- Freedom from torture and inhuman or degrading treatment
- Right to liberty and security
- Freedom from slavery and forced labour
- Right to a fair trial
- No punishment without law
- Respect for your private and family life, home and correspondence
- Freedom of thought, belief and religion
- Freedom of expression
- Freedom of assembly and association
- Right to marry and start a family
- Protection from discrimination in respect of these these rights and freedoms
- Right to peaceful enjoyment of your property
- Right to education
- Right to participate in free elections

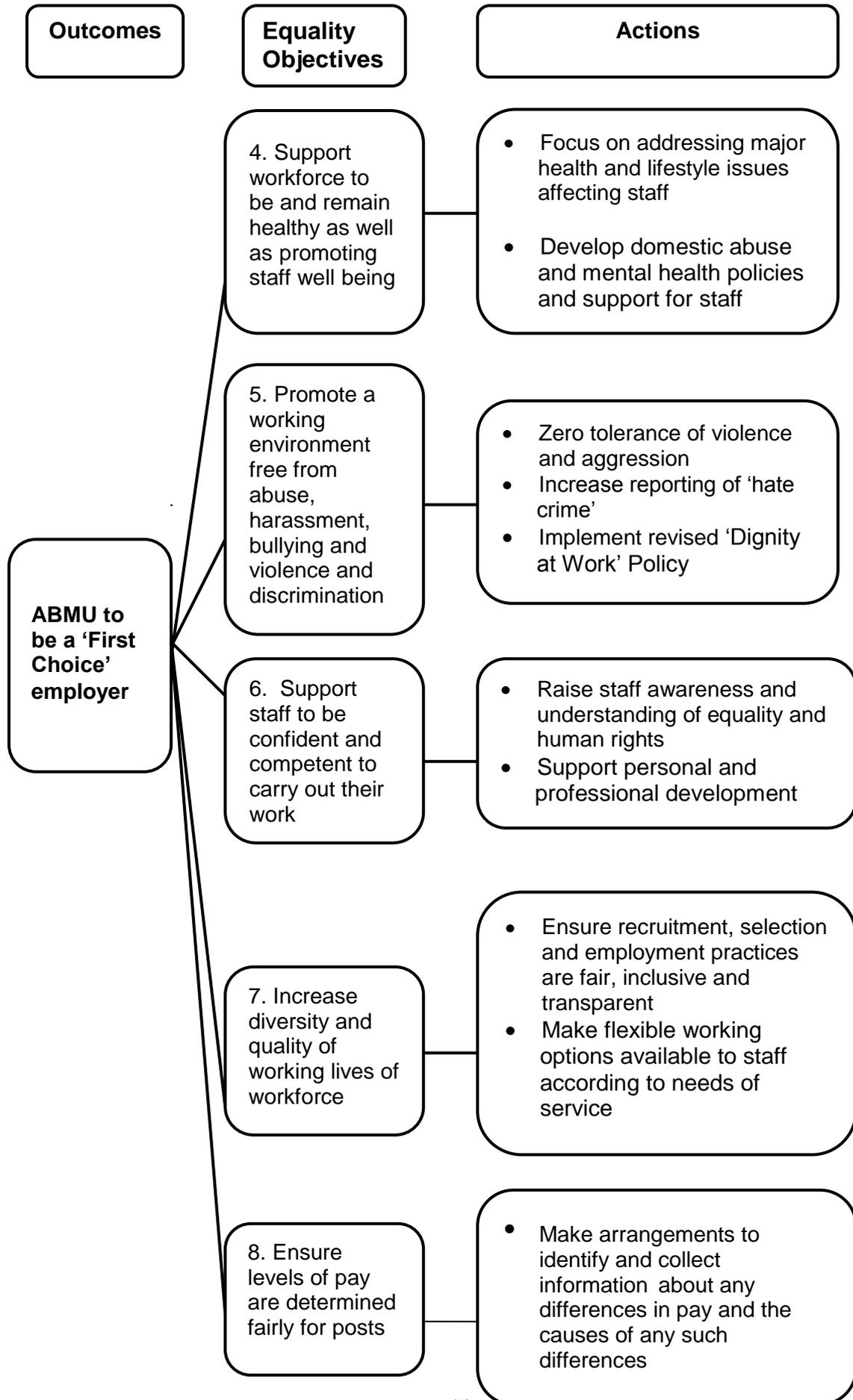
## Some of the Groups that we engage with

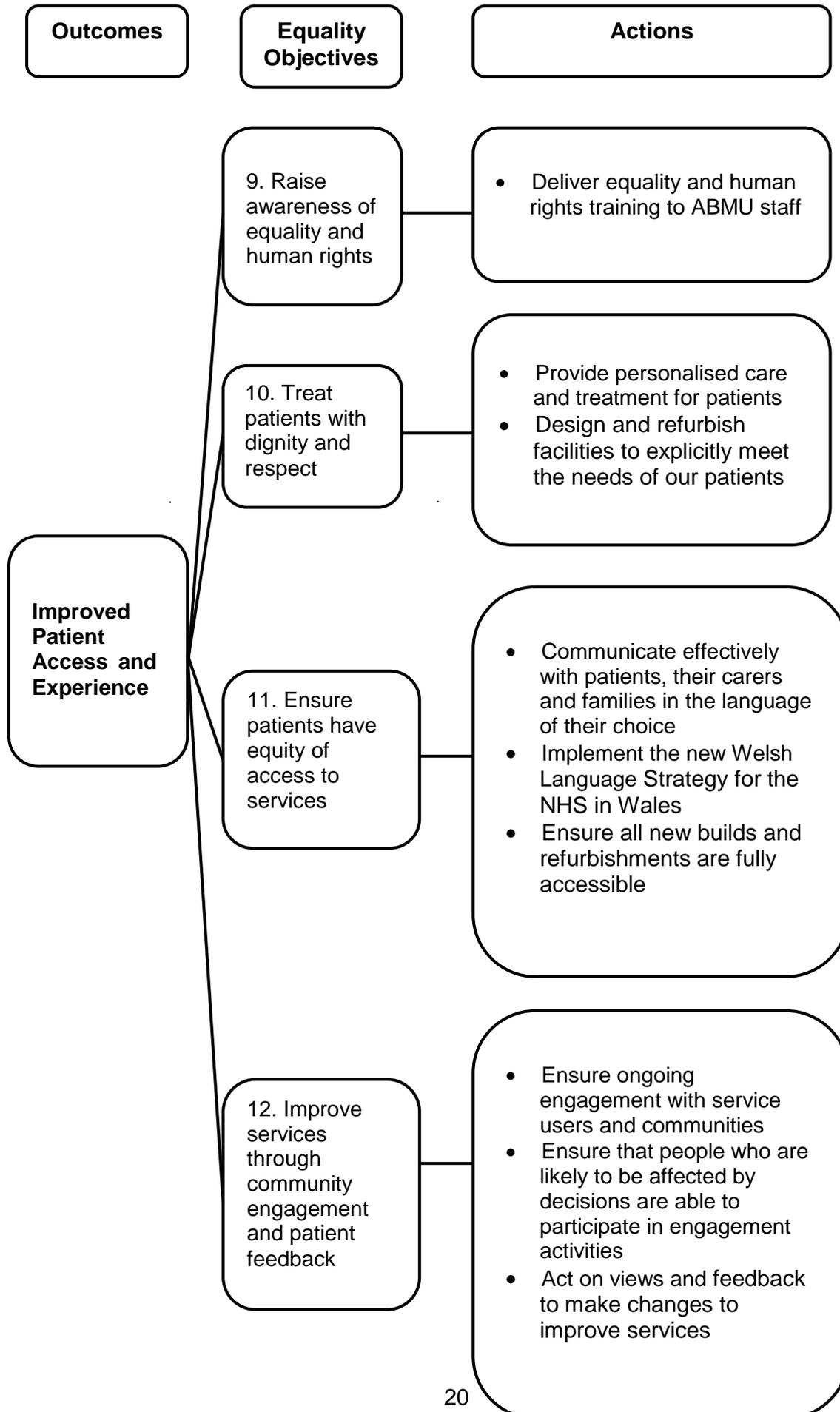
- [Race] Equality Councils
- Bridgend Equality Council
- Social Care and Health Partnerships.
- Local Government Partnerships
- The Mental Health Patient Council
- Bridgend Coalition of Disabled People
- Council for Voluntary Services
- Neath and Port Talbot Black and Minority Ethnic Forum
- The Staff Partnership Forum
- 'Have Your Say' Events
- Staff Surveys
- Our Equality Walk Rounds
- The internet and intranet
- Network 50+ Health Social Care and Well Being Forum- Swansea
- Through our equality and human rights training we have been told that language and communication are significant barriers to good health and health care
- Homeless and Vulnerable Groups Committee
- **Stakeholder Reference Group (SRG)**  
The SRG provides independent advice on any aspect of our business and is a forum to facilitate full engagement and active debate. Core membership is diverse and includes non-statutory stakeholders representing age, sexual orientation, carers, faith/belief, disability, gender, and race/ethnicity. This Group, therefore, has excellent links to the wider general public and each representative's role is to highlight the issues raised by their particular groups and to provide feedback.
- **Patient Experience Involvement Groups** have representation from carers and people with an interest in taking forward dignity and respect work.
- **Disability Equality Sub Group** includes representatives from Swansea Disability Forum, SAFE (Swansea Access for Everyone) and the Bridgend Coalition of Disabled People. The Group prioritised the expenditure of £50,000 from 2011/2012 Capital Programme on DDA improvements to existing premises.
- **Disability Reference Group (DRG)** acts as an advisory and consultative Panel to the Health Vision Swansea Programme Board. Reasonable adjustments/action are taken following suggested design amendments from the DRG where appropriate.
- **Health Professionals Forum (HPF)**  
The HPF's role is to provide a balanced, multidisciplinary professional advice to the Board on local strategy and delivery. The HPF has responsibility for facilitating engagement and debate amongst the wide range of clinical interests within the Health Board's area of activity.
- **Local Partnership Forum (LPF)**

The LPF's role is to provide a formal mechanism whereby the Health Board, as the employer, and Trade Unions/professional bodies representing the Health Board employees' work together to improve health services for the members of our local communities. It is the forum where key stakeholders engage with each other to inform, debate and seek to agree local priorities on workforce and health service issues.

# ABM University Health Board Equality Objectives







## Appendix 5

### Health Care Standards and Equality

Standard	What is this standard about?	Relevance to Equality
<b>1</b> Governance and accountability framework	Ensuring that there is open and transparent governance arrangements in place and that they are set within clear accountability mechanisms	Upholds our values and standards of behaviour
<b>2</b> Equality, diversity and human rights	To embed equality priorities in the functions and delivery of services recognising the diversity of the population and rights of individuals under equality, diversity and human rights	Meeting the needs of individuals and uphold their human rights. Challenging and tackling discrimination and promoting equality and human rights
<b>3</b> Health promotion, protection and improvement	Organisations working in partnership with others to protect and improve the health and well being of staff and service users, and reduce health inequalities	Supporting the health and well being of service users and members of staff
<b>5</b> Citizen engagement and feedback	Services that are provided by the NHS should be genuinely shaped by and meet the needs of the people that it serves.	Inclusive engagement with members of our communities to promote their involvement in the design, planning and delivery of services that meet an individual's needs
<b>8</b> Care planning and provision	Recognises and addresses the needs of patients, service users and their carers	Provision of 'personalised care'
<b>10</b> Dignity and respect	Staff will treat patients, service users, their relatives and carers with dignity and respect and staff themselves must be treated with dignity and respect for their differences.	Provision of health care, which respects an individual's human rights to privacy, dignity and informed choice
<b>11</b> Safeguarding children and vulnerable adults	Organisations and services to promote and protect the welfare and safety of children and vulnerable adults	Providing safe and effective health care, according to an

		individual's needs
<b>12</b> Environment	Compliance with legislation and guidance to provide appropriate environments	Environments that are accessible, safe and secure and protect privacy and dignity
<b>14</b> Nutrition	To ensure that patients, service users, staff and visitors have access to safely prepared and stored foods and fluids	Patients and service user's individual nutritional and personal requirements are assessed, recorded and addressed
<b>18</b> Communicating effectively	Organisations to take into account the individual language and communication needs of their patients, service users, carers and workforce	Meeting an individual's preferred language and communication needs
<b>20</b> Records management	Organisations must ensure that from the moment that any patient record is created there is control over the quality and quantity of information and how it is maintained to effectively service its needs and those of its stakeholders	Collecting and recording patient information to avoid duplication
<b>22</b> Managing risk and health and safety	To ensure that risk management and health and safety is embedded within all health care settings and it is monitored to ensure continuous improvement	Protection and improvement of the health, safety and wellbeing of service users and members of staff
<b>25</b> Workforce recruitment and employment practices	Organisations to ensure that the right people are attracted to the service and are appropriately recruited, prepared and supported for the contribution that they can make throughout their working life	Provision of employment practices and opportunities are fair, transparent and accessible.
<b>26</b> Workforce training and organisational development	To ensure that staff are given the opportunity to develop the necessary knowledge, skills and behaviours required to undertake their roles and to meet the current and future needs of their organisations	Delivery of 'patient focused' care by staff who are qualified, trained, competent and confident to do so