

APPENDIX 1

Equality Delivery System (EDS2) Objectives and Outcomes – 2018/19 Assessment Overall Grades

Goal 1	Outcome		2016 Score	2017 Score	2018 Score
Better Health Outcomes for All	1.1	Services are commissioned, procured, designed and delivered to meet the health needs of local communities.	<i>CCG / Public Health</i>	<i>CCG / Public Health</i>	<i>CCG / Public Health</i>
	1.2	Individual people’s health needs are assessed and met in appropriate and effective ways.	<i>CCG / Public Health</i>	<i>CCG / Public Health</i>	<i>CCG / Public Health</i>
	1.3	Transitions from one service to another, for people on care pathways, are made smoothly and everyone well informed.	Developing	Developing	Developing
	1.4	When people use NHS services their safety is prioritised and they are free from mistakes, mistreatment and abuse.	Developing	Developing	Developing
	1.5	Screening, vaccination and other health promotion services reach and benefit all local communities.	<i>CCG / Public Health</i>	<i>CCG / Public Health</i>	<i>CCG / Public Health</i>
Assessment Criteria	<p>The assessment criteria of Goal 1 for Outcome 1.3 and 1.4 was based on the following key factors:</p> <ul style="list-style-type: none"> • Evidence of one or more care pathway which suggests there is significant local equality progress as people transit from one service to another. • Evidence of one or more service / care setting which suggests there is significant equality progress for people’s safety. • For all protected groups, we have to assess and grade how well: <ul style="list-style-type: none"> • Service transitions are made, including how well patients, carers and professionals are kept informed of what is happening. • Key aspects of safety are prioritised and managed. 				

	<ul style="list-style-type: none"> Evidence of how well other disadvantaged groups, including inclusion health groups fare compared with people overall. 	
Assessment Key Gaps / Development Areas	<p>The key gaps / development areas of Goal 1 are: Patient equality monitoring data not yet recorded in respect of all 9 protected characteristics. Disability; Sexual Orientation; Transgender; and Marriage and Civil Partnership not yet recorded.</p> <p>Following the merger of University Hospitals Birmingham (UHB) with Heart of England NHS Foundation Trust, the combined Trust is making significant progress and effort to ensure that all ICT systems are efficient, robust and perform across all sites.</p> <p>As part of this on-going programme of work, a new Patient Administration System (PAS), Oceano, will be implemented across Heartlands Hospital, Good Hope Hospital, Solihull Hospital and Birmingham Chest Clinic by October 2019. As Oceano is currently in-place at QEHB (Queen Elizabeth Hospital Birmingham) this will ensure that a common PAS is used throughout the Trust, with the aim to simplify existing processes by providing one single PAS system where possible. The new PAS will support the improvement of patient care by driving accurate and timely patient data through reducing errors and enabling best practice. The Accessible Information Standard (SCCI1605) to be used as a driver to implement equality monitoring throughout the Trust. We will be able to record all protected characteristics of all patients and service users</p> <p>Once equality data across 9 characteristics is collated and recorded within hospital activity, data can be extracted to identify any visible trends which require further investigation.</p> <p>The Trust's E&D /Workforce E&D Leads are active members of West Midlands NHS Regional Equalities Network Working in collaboration to share equality data and best practice and jointly promote and challenge inequalities. Plans are in place to progress to the next grade (Achieving), with milestones (EDS Action Plan 2016/2020 currently being developed).</p>	

Equality Delivery System (EDS2) Objectives and Outcomes – 2018/19 Assessment Overall Grades

Goal 2	Outcome		2016 Score	2017 Score	2018 Score
Improved Patient Access and Experience	2.1	People, carers and communities can readily access hospital, community health or primary care services and should not be denied access on unreasonable grounds.	Developing	Developing	Developing
	2.2	People are informed and supported to be as involved as they wish to be in decisions about their care.	Developing	Developing	Developing
	2.3	People report positive experiences of the NHS.	Achieving	Achieving	Achieving
	2.4	People’s complaints about services are handled respectfully and efficiently.	Developing	Developing	Developing
Assessment Criteria	<p>The assessment criteria of Goal 2 was based on the following key factors:</p> <ul style="list-style-type: none"> • Evidence of one or more service / care setting which suggests that there is significant local equality progress for people in relation to: • Access to services. • The information and support people receive, so that they can be involved in decisions about them. • People’s experiences. • Handling of complaints. • For all protected groups, we have to assess and grade how well: • Services are accessed, taking into account the fairness of reasons when access is denied. • People are informed and supported. • Service is experienced. • Complaints are handled. • Evidence of how well other disadvantaged groups, including inclusion health groups fare compared with people overall. 				

<p>Assessment Key Gaps / Development Areas</p>	<p>The key gaps / development areas of Goal 1 are: Patient equality monitoring data not yet recorded in respect of all 9 protected characteristics. Disability; Sexual Orientation; Transgender; and Marriage and Civil Partnership not yet recorded.</p> <p>The Trust has an on-going programme of work, to implement a new Patient Administration System (PAS), Oceano across Heartlands Hospital, Good Hope Hospital, Solihull Hospital and Birmingham Chest Clinic. As Oceano is currently in-place at QEHB (Queen Elizabeth Hospital Birmingham) this will ensure that a common PAS is used throughout the Trust, with the aim to simplify existing processes by providing one single PAS system where possible. The new PAS will support the improvement of patient care by driving accurate and timely patient data through reducing errors and enabling best practice. The Accessible Information Standard (SCC11605) to be used as a driver to implement equality monitoring throughout the Trust. We will be able to record all protected characteristics of all patients and service users.</p> <p>Once equality data across 9 characteristics is collated and recorded within hospital activity, data can be extracted to identify any visible trends which require further investigation.</p> <p>The Trust's E&D Patient services/Workforce Leads are active members of West Midlands NHS Regional Equalities Network . Working in collaboration to share equality data and best practice and jointly promote and challenge inequalities. Plans are in place to progress to the next grade (Achieving), with milestones (EDS Action Plan 2016/20 currently being developed).</p>	
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Equality Delivery System (EDS2) Objectives and Outcomes – 2018/19 Assessment Overall Grades

Goal 3	Outcome		2016 Score	2017 Score	2018 Score
Empowered, Engaged and Well-Supported staff	3.1	Fair NHS recruitment and selection processes lead to a more representative workforce at all levels	Achieving	Achieving	
	3.2	The NHS is committed to equal pay for work of equal value and expected employers to use equal pay audits to help fulfil their legal obligation	Developing	Developing	
	3.3	Training & Developing opportunities are taken up and positively evaluated by all staff	Developing	Developing	
	3.4	When at work, staff are free from abuse, harassment, bullying and violence from any source	Developing	Developing	
	3.5	Flexible working options are made available to all staff, consistent with the needs of patients, and the way that people lead their lives.	Achieving	Achieving	
	3.6	Staff report positive experiences of their membership of the workforce	Developing	Developing	
Assessment Criteria	<p>The assessment criteria of Goal 3 is based on these key factors</p> <ul style="list-style-type: none"> • Evidence that the workplace is representative of staff from all protected groups, taking into account the fairness of recruitment & selection processes. • Evidence that we have assessed and graded participation in and evaluation of training & development opportunities for staff from protected groups • Evidence that we have used equal pay audits to help fulfil our legal obligations. For all protected groups we have to assess & grade the extent to which they receive equal pay for work of equal value. • For all protected groups we have to assess & grade the extent of abuse, harassment, bullying & violence • For all protected groups we have to assess & grade the availability of flexible working options • For all protected groups we have to assess & grade how well membership of the workforce is experienced 				

Assessment Key Gaps / Development Areas	<p>The key gaps/development areas of Goal 3 are:</p> <ul style="list-style-type: none"> • Improve equality data collation for equality monitoring and analyse inequalities • Feedback from staff who are retiring from the Trust to be obtained so as to further investigate the statistics in relation to training and PDR. • Continue with overseas recruitment drives. • Develop and implement Inclusion and Diversity module within HEFT Leadership Programme. • Continue to offer training at a variety of days and times. • Analyse results from the planned equal pay audit. • Facilitate and support management of LGBT staff network ' Friends of Rainbow' within the Trust so as to provide opportunities for people to share, learn and contribute to improving the Trust. • Undertake audit of incidents of violence and aggression for BME staff to identify key actions. • Active support of and participation in Birmingham Pride 2017. • Involve local LBGTQ+ groups in Trust business and in particular the activities of the Inclusion & Diversity Steering Group. • Events planned for 2017 to raise awareness of protected characteristics. • Develop network for Staff Living with a Disability. • Develop Role Models stories. 	

Equality Delivery System (EDS2) Objectives and Outcomes – 2018/19 Assessment Overall Grades

Goal 4	Outcome		2016 Score	2017 Score	2018 Score
Better Health Outcomes for All	4.1	Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations.	Achieving	Achieving	
	4.2	Papers that come before the Board and other major Committees identify equality-related impacts including risks, and say how these risks are to be managed.	Developing	Achieving	
	4.3	Middle managers and other line managers support and motivate their staff to work in culturally competent ways within a work environment free from discrimination.	Developing	Developing	
Assessment Criteria	<p>The assessment criteria of Goal 4 is based on whether both Board members and other Leaders:</p> <ul style="list-style-type: none"> Evidence of 10- 20 instances when Board members and senior leaders had the opportunity to demonstrate their commitment to equality in the past year. Evidence of 10-20 papers that came to the Board and other major committees in the past year or, if needs be, a longer period and assess & grade the extent to which the selected papers took account of the equality related impacts including risks and how risks will be managed. Assess & grade for all protected groups the extent to which staff are supported within the workplace 				
Assessment Key Gaps / Development Areas	<p>The key gaps/development areas of Goal 4 are:</p> <ul style="list-style-type: none"> Develop and embed an Inclusion and Diversity HEFT Management and Leadership programme Produce an Inclusion and Diversity Video / Podcast for use within the above programme and for wider roll out as a standalone training resource within the e-learning online training resources. Review the method of communicating initiatives so as to further increase take up and awareness. 				

APPENDIX 2

Equality Objectives 2018-2019

EDS Goal	Equality Objective	Key Progress
<p>Goal 1: Better Health Outcomes for All</p>	<p>We will work together with the local LGBT Community to improve and expand the quality of the information, knowledge and understanding we have about our LGBT service users. We will ensure their experience of our services is improved by being more responsive to their needs.</p>	<ul style="list-style-type: none"> • Trust staff LGBT network, Birmingham LGBT Centre and the South Asian LGBT Group supported the development of patient experience feedback pilot across UHB hospital sites to get to know and better understand the experience of our Bisexual, Gay, Lesbian and Transgender patients, services users and partners whilst visiting us for appointments, treatment or accompanying their partner. The feedback will include sharing their experience against certain indicators such as staff attitude, communication, assumptions and overall impression of the Trust. This will involve participating in a questionnaire after attending their appointment, taking into consideration whether the care they have received meets their needs as a Bisexual, Gay, Lesbian or Transgender patient, service user or partner. • The Pilot will be undertaken within the outpatient areas at Solihull and Good Hope Hospital sites in 2019. The duration of the pilot will be 3 months. The findings of the pilot project will be shared with internal and external stakeholders and will inform the development of policy and service improvement programmes. • A cohort of the Trust LGBT Staff Network participated in the Birmingham Pride March in May 2018. • In February 2019 to celebrate LGBT History Month UHB worked in partnership with the University of Birmingham to arrange a conference on Monday 25 February at the QEHB. This included an interactive panel discussion on 'How health services can better meet the needs of the LGBT+ community'. The conference was well attended and received. • The Trust supported Transgender Awareness Week in November 2018 to help raise the visibility of transgender and gender non-conforming people, and address

		<p>the issues the community faces through the Trust staff network groups. Also, on daily Staff notice: Inthelooop useful resources were shared to help better understand gender issues to educate and advance advocacy around the issues of prejudice, discrimination, and violence that transgender people face. used social media like Twitter and Facebook to show their support and made their pledges and shared with staff</p>
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Equality Objectives 2018-2019

EDS Goal	Equality Objective	Key Progress
<p>Goal 2: . Improved patient access and experience</p>	<p>We will ensure that our patients are communicated with in a manner that is appropriate to their specific need or requirement within the Trust. We will identify how patients prefer us to communicate with them from the earliest point of contact. Our objective will be to ensure that every time we communicate with them, that we use their preferred method</p>	<ul style="list-style-type: none"> • The Trust has set up a “Care of people with Learning Disability ” Working Group, one of the priority identified by the group is to look at ways of implementing the learning disability improvement and the Accessible Information Standards. It is recognised that Trust must have mechanisms to identify and flag patients with learning disabilities, autism or both from the point of admission through to discharge; and where appropriate, share this information as people move through departments and between services. • Trust has an on-going programme of work, to implement the new Patient Administration System (PAS), Oceano, across all HGS sites (Heartlands Hospital, Good Hope Hospital, Solihull Hospital and Birmingham Chest Clinic) by October 2019. As Oceano is currently in-place at QEHB (Queen Elizabeth Hospital Birmingham) this will ensure that a common PAS is used throughout the Trust, with the aim to simplify existing processes by providing one single PAS system where possible. The new PAS will support the improvement of patient care by driving accurate and timely patient data through reducing errors and enabling best practice. The Accessible Information Standard (SCCI1605) to be used as a driver to implement equality monitoring throughout the Trust. • The Trust has made changes to its website which is now fully accessible through the ability to increase font size, change screen colours and the installation of text-to-speech software. Additional work is being investigated to produce patient information leaflets on-line in a similar format. • Easy read health leaflets are now available on the Trust intranet ‘ Learning Disabilities ‘ page. See link below;

<http://sharepoint10/sites/corporate/Id/Lists/Useful%20Links/AllItems.aspx>

Current Challenges

- It is, as yet, unclear whether the current ICT systems are able to accommodate the changes required under the Accessible information Standard and further progress on the roll-out of the standard is entirely dependent on the ICT systems.
- Additional resource may be required to deliver the preferred communication methods, particularly in services that are likely to have higher numbers of affected patients (i.e. ophthalmology, ENT).

Equality Objectives 2018-2019

EDS Goal	Equality Objective	Key Progress
<p>Goal 3: Empowered, engaged and included staff</p>	<p>Work to reduce inequalities experienced by existing staff, as well as, those applying for jobs within the Trust from a LGBT background so as to improve the engagement and experiences of LGBT staff within the workplace</p>	<ul style="list-style-type: none"> • Work continues with Stonewall to ensure all Trust Policy and Procedures guarantees the equal treatment of LGBT and are terminology neutral. The Trust's Equal Opportunities policy has been revised to ensure equality and inclusion throughout the workforce. • Work continues to introduce a policy for supporting individuals who are transgender (workforce and patients). • Staff LGBT network has been developed and promoted for all staff to attend. • Recruitment and Selection training and HR masterclass training, including disciplinary and grievance training, dignity at work training, performance management training and sickness absence training, has been revised to include Unconscious Bias. • Work continues to collect and analyse sexual orientation and gender identity data as part of equality monitoring of the fairness in recruitment and selection from application to appointment. • In February 2017, work was undertaken to collect protected characteristic information via an on-line questionnaire on Moodle in order to improve the data we hold on our staff so that we may understand better our workforce better and make well informed decisions about their needs moving forward. • Work continues in partnership with UHB, to improve awareness, reduce inequalities and enhance engagement for LGBT staff. • Work continues with Stonewall and participation in the Workplace Equality Index

		<p>to benchmark against other organisations.</p> <ul style="list-style-type: none">• Participation in Pride and Shout festivals and celebrate LGBT awareness through the calendar of events.• A campaign took place to address bullying and harassment (Jan 2017) which promotes a zero tolerance culture and work continues to develop specific training to those who deal with bullying and harassment cases, in particular homophobic, biphobic and transphobic training
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Equality Objectives 2018-2019

EDS Goal	Equality Objective	Key Progress
<p>Goal 4: Inclusive leadership</p>	<p>We will introduce Unconscious Bias and Inclusion training into the mandatory E&D training for all staff and offer an Inclusive Leadership Course for managers to gain the knowledge in order to ensure all staff are managed fairly and equally and to embrace difference</p>	<ul style="list-style-type: none"> • A dedicated section specifically on Unconscious Bias has been included in the mandatory equality and diversity training for all staff. • Recruitment and Selection training and HR masterclass training, including disciplinary and grievance training, dignity at work training, performance management training and sickness absence training, has been revised to include Unconscious Bias. • Work is being undertaken in partnership with UHB and third party partners, such as Health Education West Midlands, to develop further (non-mandatory) Unconscious Bias training available for all staff • Work is being undertaken in partnership with UHB and third party partners, such as Health Education West Midlands, to develop an Inclusive Leaders training package available for Managers. • Unconscious Bias and inclusion training developed and piloted on a cohort of Group Support Managers. • Equality and diversity, to include unconscious bias, training has been included as part of the Consultant's 4 week induction program to include Unconscious Bias and Inclusion (to commence June 2017).

APPENDIX 3

Equality Objectives 2016-2020

EDS GOAL 1	Better health outcomes for all
Objective 1	We will work together with the local LGBT Community to improve and expand the quality of the information, knowledge and understanding we have about our LGBT service users. We will ensure their experience of our services is improved by being more responsive to their needs.
Key Actions (Actions / Timescales detailed within EDS Action Plan 2017/2018)	<ul style="list-style-type: none"> • Engage with LGBT service users to gain a more in-depth understanding of their health and social needs. To ensure Trust services are fully inclusive of their needs. • To work collaboratively with UHBT Inclusion & Diversity Lead to develop and implement Transgender policy/Guidance • To raise staff awareness of LGBT people's health needs and experiences. To raise awareness of the reasons for equality data collection within the Trust. • To work collaboratively with local health economy partners and Stonewall to participate in visible campaign focused upon equitable access to services for LGBT patients within Birmingham. • To promote national trans awareness events and fully support and participate within Birmingham Pride 2018.
Evidence	<ul style="list-style-type: none"> • Established working relationship with Birmingham LGBT Centre, Birmingham University LGBT events and HEFT LGBT staff network • Transgender policy developed and implemented • Staff awareness sessions held and equality data collection improved • Collaborative work undertaken and participated in events to improve LGBT access to services • Trans and LGBT events supported • Analysis of data in relation to complaints and compliments • Improved equality data collection
Outcome	Services more responsive to needs.
Time scale	By April 2018, with further reviews in September 2018 and April 2019.

Mainstreamed	This equality objective will be taken forward by Head of Equality & Diversity
Reporting	Progress will be reported to Inclusion & Diversity Steering Group.
Link to UHB Values	Links to UHB Corporate objectives: Collaborative, Honest, Accountable, Innovative and Respectful
External Links	NHS EDS2 Outcomes: 1.2 Individual people's health needs are assessed and met in appropriate and effective ways.

Equality Objectives 2016-2020

EDS GOAL 2	Improved patient access and experience
Objective 2	We will ensure that our patients are communicated with in a manner that is appropriate to their specific need or requirement within the Trust. We will identify how patients prefer us to communicate with them from the earliest point of contact. Our objective will be to ensure that every time we communicate with them, that we use their preferred method.
Key Actions (Actions / Timescales detailed within EDS Action Plan 2017/2018)	<ul style="list-style-type: none"> • Care for People with Learning Disabilities in UHB Working Group to review Accessible Information Standard to review and agree the process for recording and meeting patients communication needs. To review existing data systems and feasibility of flagging patient needs • To educate staff about accessible information. To raise awareness of the different types of accessible resources, communication support and how they can help. To ensure they have an understanding of the steps which can be taken to support patient's needs. • To further develop the provision of easy read patient information. To review the Trust's Patient Information Policy & SOP. • Continue to implement Interpreter and Translation Service Procedure and practice. To raise staff awareness of how to access Interpreter & Translation Services.
Evidence	<ul style="list-style-type: none"> • Care for People with Learning Disabilities in UHB Working Group established, key priorities and resources identified to undertake Accessible Information Standard related work streams to implement the standard. • Accessible Information & Interpreter Services Awareness Staff Survey (To set baseline score to measure future progress). • Patient Survey (Were you asked if you had any information or communication needs?) To set baseline score to measure future progress. • 100% Increase in provision of Trust Easy Read Patient Information resources • Analysis of data in relation to complaints and compliments
Outcome	By using communication methods that are preferred by patients who have a clinical need, we will be able to design patient centred services responsive to individual needs
Time scale	By April 2018, with further reviews in September 2018 and April 2019
Mainstreamed	This equality objective will be taken forward by Head of Equality & Diversity

Reporting	Progress will be reported to Inclusion & Diversity Steering Group.
Link to UHB Values	Links to UHB Corporate objectives: Collaborative, Honest, Accountable, Innovative and Respectful
External Links	NHS EDS2 Outcomes: 2.1 People, carers and communities can readily access hospital services and should not be denied access on reasonable grounds

Equality Objectives 2016-2020

EDS GOAL 3	Empowered, engaged and included staff
Objective 3	Work to reduce inequalities experienced by existing staff, as well as, those applying for jobs within the Trust from a LGBT background so as to improve the engagement and experiences of LGBT staff within the workplace.
Key Actions (Actions / Timescales detailed within EDS Action Plan 2016/17)	<ul style="list-style-type: none"> • Ensure all Trust Policy and Procedures guarantees the equal treatment of LGBT and are terminology neutral. • To introduce a Transgender policy for the workforce; this will identify support mechanisms. • To introduce and offer LGBT specific training to all staff and as part of the Inclusion Champion Program (Allies). • To promote awareness and develop the LGBT network to increase membership. • To develop an Inclusive Champion Program (Allies) to engage all staff. • To revise the Recruitment and Selection training to include Behavioural Assessment, Unconscious Bias and Inclusion training. • To collect and analyse sexual orientation and gender identity data as part of equality monitoring of the fairness in recruitment and selection from application to appointment. • To engage in targeted initiatives with other organisations and the community, and to work in partnership with UHB, to improve awareness, reduce inequalities and enhance engagement for LGBT staff. • To be an active member of Stonewall and participate in the Workplace Equality Index to benchmark against other organisations. • To take part in local and national events such as Pride and Shout festivals and celebrate LGBT awareness through the calendar of events. • To develop a corporate action plan to address bullying and harassment which promotes a zero tolerance culture and offers specific training to those who deal with bullying and harassment cases, in particular, homophobic, biphobic and transphobic training
Measures	<ul style="list-style-type: none"> • Transgender policy developed and implemented • LGBT training and inclusion Champion program implemented • LGBT staff network supported • Recruitment and selection training revised and equality data analysed • Established collaborative working with partner organisations on LGBT agenda • Achieve Stonewall Workplace Equality Index Standard • LGBT Pride and Shout events supported

	<ul style="list-style-type: none"> • Anti-discriminatory practices promoted across the Trust
Outcome	Improved LGBT staff experience and engagement within the workplace. Improved success rates of LGBT candidates within the recruitment process leading to a representative and inclusive workplace for LGBT staff at HEFT .
Time scale	By April 2017, with further reviews in September 2018 and April 2019.
Mainstreamed	This equality objective will be taken forward by Workforce Inclusion & Diversity Lead
Reporting	Progress will be reported to Inclusion & Diversity Steering Group.
Link to UHB Values	Links to UHB Corporate objectives: Collaborative, Honest, Accountable, Innovative and Respectful
External Links	<p>NHS EDS2 Outcomes:</p> <p>3.1 Fair NHS recruitment & selection processes lead to a more representative workforce at all levels</p> <p>3.6 Staff Report positive experiences of their membership of the workforce.</p>

Equality Objectives 2016-2020

EDS GOAL 4	Inclusive Leadership
Objective 4	We will introduce Unconscious Bias and Inclusion training into the mandatory E&D training for all staff and offer an Inclusive Leadership Course for managers to gain the knowledge in order to ensure all staff are managed fairly and equally and to embrace difference
Key Actions (Actions / Timescales detailed within EDS Action Plan 2016/17)	<ul style="list-style-type: none"> • Revise the mandatory E&D training package to include Unconscious Bias and Inclusion. • Work in partnership with UHB and third party partners, such as Health Education West Midlands, to develop an Unconscious Bias training package available for all staff • Work in partnership with UHB and third party partners, such as Health Education West Midlands, to develop an Inclusive Leaders training package available for Managers. • Introduce Inclusion Champions (Allies) to promote awareness throughout the Trust and embed a culture of inclusivity. • Develop a suite of specific training packages which cover the protected characteristics to improve awareness and understanding for all staff
Evidence	<ul style="list-style-type: none"> • Mandatory E&D training revised and implemented • Unconscious Bias and inclusion training developed and implemented • Inclusive Leaders training developed and implemented • Inclusion Champions recruited and improved staff awareness • Protected characteristics individual training programmes available for staff
Outcome	By equipping staff/managers to deal effectively with Inclusion and Diversity issues at a local level, there is improved staff engagement and experience within the workplace.
Time scale	By April 2017, with further reviews in September 2018 and April 2019.
Mainstreamed	This equality objective will be taken forward by Workforce Inclusion and Diversity Lead.
Reporting	Progress will be reported to Inclusion & Diversity Steering Group

Link to UHB Values	Links to UHB Corporate objectives: Collaborative, Honest, Accountable, Innovative and Respectful
External Links	<p>NHS EDS2 Outcomes:</p> <p>4.3 Middle managers and other line managers support their staff to work in culturally competent ways within a work environment free from discrimination.</p> <p>.</p>