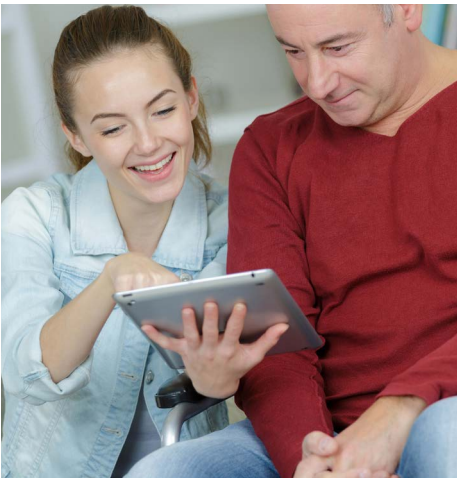


Equality, diversity, and inclusion annual report



With **all of us** in mind.



With **all of us** in mind.

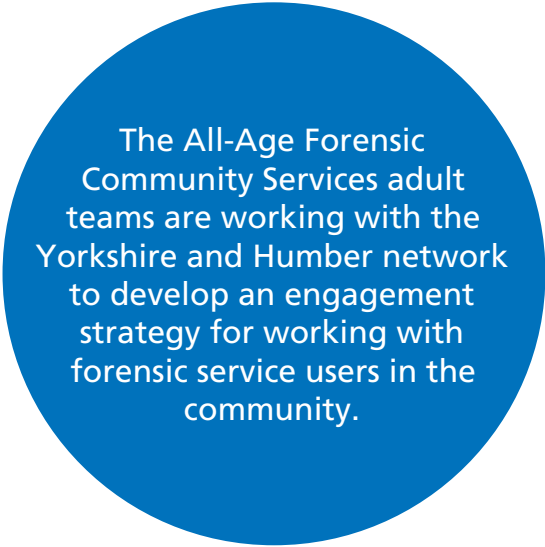
1. Introduction

Our Trust belongs to us all. It considers the voices of service users, carers, families and friends, our staff, board members and people who live in the local communities we serve. We take this responsibility very seriously. It is fundamental to how we communicate with and work alongside everyone.

Our mission is to help everyone to fulfil their potential and live well in their community. This is supported by a clear set of values that put people at the heart of everything we do. Addressing inequalities in health such as barriers to accessing services and waiting times have continued to be a key focus this past year. A key part of this has been improving the quality of our data so we can understand what that data is telling us which has been made possible with the recruitment of a health analyst to support this work. Our data resources now mean we can start to use the data and monitor patterns and activity through the lens of equality.

We have also progressed work with partners to increase the involvement of children and young people and increase our membership. A key outcome has been the increased recruitment of young people as governors. We have also maintained and built on our connection with the voluntary and community sector and increased our approach to involvement by introducing 'community connectors.' Our commitment to carers is evident through our level 2 carers status accreditation, led by our awarding winning team. The Trust continues to maintain a strong focus on racial inclusion, tackling stigma and discrimination whilst building a diverse workforce, cultural competency, and leadership, working closely with our wider system partners to develop shared resources and approaches.

Whilst we know there is still much more that we need to do, this year the Trust has made considerable progress in delivering on our equality and public sector equality duty and work is progressing at pace to ensure we continue to build on our progress in the forthcoming year and beyond. To ensure we comply with our statutory responsibilities under the Equality Act 2010 especially the Public Sector Equality Duty, (PSED) and the Health and Social Care Act 2022 we must consider equality and involvement at each stage of service delivery including as part of any decision-making process.



The All-Age Forensic Community Services adult teams are working with the Yorkshire and Humber network to develop an engagement strategy for working with forensic service users in the community.

The Trust believes that an integrated approach to equality, involvement, communication, and membership has help us deliver on our inclusion agenda. We know that each of these areas has its own drivers and legal obligations which we need to adhere to and deliver on. Our approach to equality will be driven by involving people and will ensure our methods and approaches are reflective of the audience we are aiming to reach. This means that a one size fits all or single approach will not provide the right conditions. Our commitment will be to always understand our audience before we start any activity.

The Trust has an [Equality, Involvement, Communication and Membership strategy Equality-Involvement-Communication-and-Membership-Strategy.pdf \(southwestyorkshire.nhs.uk\)](https://southwestyorkshire.nhs.uk/equality-involvement-communication-and-membership-strategy) and supporting annual action plans to ensure an integrated approach to delivering on our strategic objectives. Using the principle of involvement to underpin everything we do; we will drive equality and inclusion across our Trust.



Our Voice Counts Project at Newton Lodge was commissioned to ensure the voices of the Black, Asian, Minority Ethnic population at Newton Lodge were heard and action taken to make improvements.



A guidance document has been developed to support staff in the management of hate crime / challenging incidents in within services.

2. About the Trust

We are South West Yorkshire Partnership NHS Foundation Trust, a specialist NHS Foundation Trust that provides community, mental health, learning disability, and autism services to the people of Barnsley, Calderdale, Kirklees, and Wakefield. We also provide some secure (forensic) services to the whole of West Yorkshire. All our services are focused on principles of recovery and co-production, working with the strengths of each person and those of their carers and wider community.

The Trust also provides services that promote healthier communities and prevention through supported self-care, recovery focused approaches, peer support and community involvement, and volunteering to supported employment. The Trust's recovery colleges, linked charities Creative Minds, Spirit in Mind, Mental Health Museum, and significant volunteering services, as well as Altogether Better (a national organisation that is hosted by the Trust) further contribute to this. Set out below are our vision, mission, and values.

Our vision:

To provide outstanding physical, mental, and social care in a modern health and care system.

Our mission:

We help people reach their potential and live well in their community.

Our values:

We are a values-based organisation, which means our values are followed by all our staff and underpin everything we do:

- We put the person first and in the centre
- We know that families and carers matter
- We are respectful, honest, open, and transparent
- We improve and aim to be outstanding
- We are relevant today and ready for tomorrow

Our strategic objectives are:

- Improve health
- Improve care
- Improve our use of resources
- Make this a great place to work

Our priorities for 2022/2023 are driven by understanding equality, and addressing inequality through inclusive involvement. This is the consistent theme that runs through everything that we do, driven by our equality, involvement, communication and membership strategy.

Golden threads	Strategic objective	Priority
	IMPROVING HEALTH 	Address inequalities involvement and equality in each of our places with our partners
	IMPROVING CARE 	Transform our older people inpatient services Improve our mental health services so they are more responsive, inclusive and timely Improve safety and quality
	IMPROVING USE OF RESOURCES 	Spend money wisely and increase value Make digital improvements
	GREAT PLACE TO WORK 	Inclusive recruitment, retention and wellbeing Living our values

A project has been undertaken within the service to support improving Friends and Family feedback. The service has developed QR codes, which are now available on business cards, leaflets and within carers packs and additional ChatPad.

The Trust now have strategic health facilitators in all 4 Places. These facilitators are members of the partnership forums for people with learning disabilities where accessible information is shared. Easy read as standard is also improving.

A peer support worker with lived experience has been appointed to the Horizon ward.

3. About our population

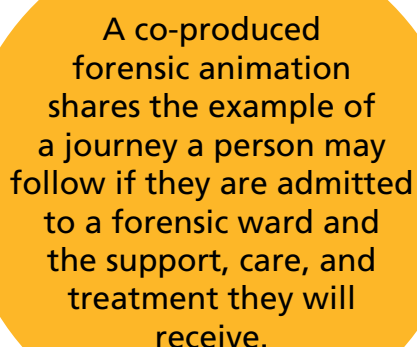
According to the latest census data 2021 The Trust serve 1.237 million people living across South and West Yorkshire, this is an increase of 17,000 people since 2011. This is broken down by the local authorities of Barnsley which is 244,572 (an increase by 5,272 since 2011), Calderdale 206,631 (decrease by 3169 since 2011) , Kirklees 433,213 (decrease by 6,787 since 2011) and Wakefield 353,370 (an increase of 21,370. The Trust also have services and staff in North Leeds, Sheffield, Doncaster, and Rotherham.

Most of the care we provide is delivered in local communities. This means we work in all the villages, towns, and cities, from Todmorden and Hebden Bridge in the west, to Castleford and Pontefract in the east, to Hoyland and the Dearne Valley to the south of Barnsley, and all points in between. Our population lives in a mix of rural and urban areas. In all communities the 2021 census tells us:

- Overall, the population total average of male and female reflects the England average. The England average is male 49.2% and female 50.8%, with female reporting higher across all local areas.
- Across all ages Kirklees now has the highest 0-18 population at 22.6% with Calderdale second highest at 21.8%. Barnsley has a higher age population 60-79 at 21.1%
- Christianity (highest in Barnsley at 51.3%) and Islam (which is highest in Kirklees at 18.5%) respectively are both the highest reported religion and belief.
- We know that white people England average of 81%.
- Of the other ethnicity Black or Black British people comprised 4.2% in England and in Kirklees 2.3%.
- Asian or Asian British in Kirklees 19.4% and Calderdale 10.5%
- The percentage population of people who reported having a disability was highest in Barnsley at 22% and Wakefield 20.1%.
- Gender identity different from registered at birth in England is 0.55% in Barnsley 0.74%, Calderdale 0.89%, Kirklees 0.9%, and Wakefield 0,81
- Marriage and civil partnership figures are again comparable to the England average with 44.7% of people married or in a civil partnership.
- The number of individuals who reported they provided more than 50 hours of unpaid care were highest in Kirklees (10,079 people) and Wakefield (10,861 people)



A RESPECT project approach was established, and the service has been celebrating a wide range of cultural events throughout the year.



A co-produced forensic animation shares the example of a journey a person may follow if they are admitted to a forensic ward and the support, care, and treatment they will receive.

4. About our workforce

According to the Workforce Equality Monitoring Annual Report published March 2023 the Trust employs 4,713 staff in both clinical and non-clinical support services. Our staff work hard to make a difference to the lives of service users, families, and carers (source: [Workforce equality information - South West Yorkshire Partnership NHS Foundation Trust](#)). Services delivered include mental health, learning disability, forensic, wellbeing services, some physical health, and an extensive range of community services.

The Board and Governors strongly believe they, and the workforce, should be reflective of communities we serve. Over the last year diversity has been retained across the Board with a good balance of gender, age, ethnicity, and sexual orientation. Governors use a targeted approach to support recruitment from local communities. Our workforce data is set out below:

- The data shows that 8.8% of our staff consider themselves to have a disability, an increase from the previous year's figure of 8.4% (2021) and 6.4% (2020). The total number of disabled staff is 414, this is an increase of 30 since last year.
- We see improvements in the number of staff reporting their religion and sexual orientation. Currently 82.5% of staff have provided data regarding their religion (an increase of 0.5%) and 88% of staff have provided data indicating their sexual orientation, an increase of 1.6% from last year's report.
- 87.7% of all staff consider themselves as White in 2022, which is a 1% decrease from 2021 data. Of the remaining 12.3%, the largest group (5.3%) consider themselves of Asian origin. The figure for Unknown, where staff declined to state their ethnicity, for the year 2022 is at 0.3%. This has increased marginally compared to last year which was at 0.2% of Trust staff. This year's percentage of Asian staff has increased to 5.3% from 5.1% in 2021. Percentage of Black staff has increased from 3.5% in 2021 to 4.2%. This is an increase of 0.7%.
- Gender – stable at 21% male 79% female – this is indicative of all NHS bodies and static from last year's report figures.
- In 2022 the Trust appointed 57 new Black staff (excluding medics). This includes international nurses and means compared to 2021 this is just over a 50% increase.
- The Trust is aware that the ethnic mix of the Trust is not reflected in the higher pay bandings. Actions are being developed to address this to ensure a more representative workforce from band 6 and above of all ethnicities.
- The data has shown an increase in staff age group 30-39 of 0.8%
- Staff in the over 60 age bands has increased again in 2022 to 10.9%. The Trust is mindful that staff are choosing to work longer, and an older workforce may require consideration from a health and wellbeing perspective regarding initiatives and support to maintain them in employment.
- Training access data by ethnicity is broadly in line with the Trust workforce profile (staff in post)

All our staff receive mandatory equality and diversity training, and over the past year the Trust has achieved compliance of an average 94% across all staff groups.

In addition to mandatory training, staff receive specific training, and in the last year staff received training on all protected groups using a series of lunchbox talks, developed by the

community using a short film. In addition, the Trust procured the development of enhanced training for equality and inclusion with a focus on bias, dominant identity with reflective practice built in.

There are four Trust staff networks. Each network is set up to engage and involve staff, ensure they have a representative voice, provide peer support and safe spaces as well as influence the Trust so we can ensure our approach to our workforce remains inclusive. Networks can influence our direction of travel, consider equality and address inequalities through discussion, participation, and leadership. The staff networks we have in place are listed below.

- Race Equality and Cultural Heritage (REaCH) staff network.
- Carers' staff network.
- Disabled staff network.
- LGBT+ staff network.


Monitoring our workforce

The Trust requirement for recording and monitoring the diversity of our workforce is further enforced by the requirement to implement a standard for race and measure the experience of staff with a disability. As A Trust we want to make sure that our workforce remains reflective and representative of our population. By doing so our service offer and work environments benefit. A diverse workforce means our awareness of cultural competency improves and our Trust becomes more inclusive for everyone.


Implementing the Workforce Race Equality Standard (WRES) and the Workforce Disability Equality Standard (WDES) are requirements for NHS commissioners and NHS healthcare providers including independent organisations, through the NHS standard contract.

The Workforce Disability Equality Standard (WDES) is a set of ten specific measures (metrics) that will enable NHS organisations to compare the experiences of Disabled and non-disabled staff. NHS organisations use the metrics data and local data to develop a local action plan and enable them to demonstrate progress against the indicators of disability equality.

You can see the full WRES and WDES data report and action plan for 2022/2023 on the [Trust website](#)



The Forensic service has evolved an active culture of patient involvement. This encompasses a range of forums including service user and carer involvement groups.



Looking at the admission rates of people from Black Asian Minority Ethnic backgrounds into older people wards to address any inequality.

5. About our membership

Members are made up of local people and staff. Being a member of the Trust means local people and staff have a greater say in how services are provided in the areas the Trust serves and how the Trust is run. Members have an opportunity to get involved and to shape the services we provide and as a foundation trust we are accountable to our members. In March 2023 the Trust had 8,358 public and 4,651 staff members. The membership database was refreshed in 2022-2023. All public members were contacted, and asked the following:

- If people wanted to remain a member – 522 people stated they did not want to.
- The preferred method of contact – most people wanted information by post 76.3% with email at 23.7%.
- If members wanted to be more actively involved with Trust business, of which 30% stated they did.

Our aim is to continue to develop our membership, so we can work more proactively with the 30% who want to have more involvement with the Trust, whilst continuing to increase representation, so it is reflective of the populations we serve. The diversity of our public members is set out below:

- The age range of our members demonstrates that most are working age adults. The data is as follows, under 25 stands at 1.9%, 26-35 is 21.8%, 36-45 is 13.8%, 46-65 is 33.7%, 66-80 is 17.8% and 80+ is at 6% with 5% not disclosing their age.
- Members are representative of the population we serve and are split across the localities as follows: 15.5% Barnsley, 14.5% Calderdale, 37% Kirklees, 25% Wakefield, 8% other parts of South and West Yorkshire.
- The member's gender split is predominantly female which does not reflect the gender split of the population we serve, 65% of members are female to 34.7% male, with 0.3% identifying as a gender not assigned at birth, left blank or prefer not to say.
- The data shows that 1.7% consider themselves to have a disability, with most stating mental health as the main disability and a few stating a long-term condition or illness.
- 11.6% of our members declared they are carers.
- Members are predominantly white British with 82% representation with Asian, Asian British, and Pakistani at 5.5%, Indian at 4.5%, African, Black Africa and Caribbean at 1.6% and other ethnic groups making up 8% which includes, Polish, Chinese, mixed background and other.
- Members who stated their religious belief were identified as predominantly Christianity at 60%, with other religions such as Islam, Jewish, Buddhist, Hindu, all under 1% or less. It is worth noting that only 4% of all members responding stated their religious belief.
- 95% of Sexual orientation was not declared, with those responding reporting as heterosexual 3.8% and 1.2% reported as gay, lesbian, or bisexual.
- 95% of marital status was not declared, of those who did 2% were married or in a civil partnership.
- There are no records of members who are pregnant or who have given birth in the last 12 months.

The Trust recognises that some members may wish to be more actively involved in the life of our Trust than others. We know that an effective membership can only be achieved if we embrace an inclusive approach, encourage diverse representation, demonstrate effective involvement, and ensure accessible information and communication. We will strive to create a culture of active involvement for as many members as possible through active engagement.

The Trust's Constitution sets out the role and duties of members. Information on membership is publicly available on the members section of the website.

Membership of the Trust is free, with few specific requirements apart from a lower age limit of 11 and no upper age limit. This year we have worked hard to increase our representation of young people which is now reflected within our governor population. More work to understand the involvement of children and young people will continue into 2024 with the support of our partners in each place. These partners, who already reach and work directly with children and young people, will help us adjust and improve our approach so it is more inclusive. Any improvement will be co-designed with the voice of young people at the centre.

6. Our strategic approach to equality and diversity

The integrated '[Equality, involvement, communication and membership strategy](#)' was developed in 2020. Using the views of over 720 people including our diverse community (see full report here), the strategy is insight driven and offers a joined-up approach to delivering equality, involvement, communication, and membership.


The strategy is supported by accompanying annual action plans to ensure that the Trust has an integrated approach to improve the health and wellbeing of everyone. Our approach has always been to live our values and 'put the person first and in the centre,' ensuring the involvement of those who use our services is representative, that care is person centred and that our services are driven by robust insight and data.

7. Progress during the period 2022-2023

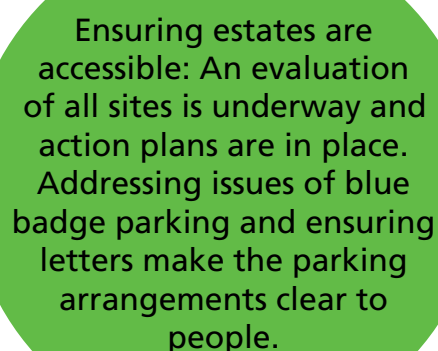
As a Trust we continue to be proud of the progress we are making. Despite the pandemic and increased pressure on both staff and services over the past few years the Trust has continued to build on the previous years' achievements.

Our strategy clearly sets out how we will measure our progress, and 'how we will know when we have got it right.' We have rated ourselves using a traffic light system with red meaning we have not achieved anything; amber we are on our journey, and green meaning we are progressing well.

Based on the information below this is how we have rated our progress this past year:



Race as a factor of abuse: support ongoing work with ward staff regarding reporting of incidents and collaboration with the police



Ensuring estates are accessible: An evaluation of all sites is underway and action plans are in place. Addressing issues of blue badge parking and ensuring letters make the parking arrangements clear to people.

We know we have got it right when we....	Our rating
Ensure we gather good quality data which can be used to support performance monitoring of service use	OK
Ensure we work in partnership with partners and communities including the voluntary, community (VCS) and faith sector	OK
Ensure we provide person centred care which promotes inclusive, culturally and gender sensitive services	Good
Develop and sustain an equality-competent organisation that demonstrates inclusive and diverse leadership and workforce	OK
Ensure people who access health and social care services, families, carers, and the public are involved	Good
Use equality and demographic data to ensure we inclusively involve the right people	Good
Use the assets in our communities and create the right conditions to involve local people	OK
Ensure we are an exemplar in co-production	OK
Record, report and publish insight so people can see the information driving our service decisions	Good

In addition, we measure our progress using the Equality Delivery System (EDS). The results for the period 2022-2023 graded as 'achieving' and the detailed results can be found here [How well are we doing? - South West Yorkshire Partnership NHS Foundation Trust](#)

This is what we have done this year:

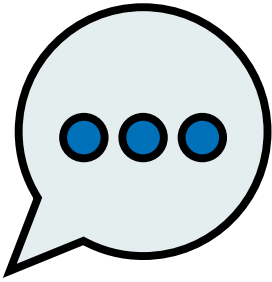
To support the collection of insight and data we have:



- ✓ Created version 2 of a Trust wide mental health equality impact assessment (EIA) and toolkit.
- ✓ Maintained a resources library for equality publications and data and shared with care groups and teams.
- ✓ Progressed the All of You campaign which has improved our data quality for ethnicity by 20%
- ✓ Maintain a dedicated intranet page for staff to access resources and materials.
- ✓ Continue to use our health inequalities dashboard which we have now shared with system partners as an example of good practice.
- ✓ Improved equality data collection of our linked charities 'Creative Minds' and 'EYUP'
- ✓ Continue to Improve our service EIAs and action plans which are now part of our performance reporting. We have also developed a digital framework to digitise all EIAs by 2024.

Addressing inequalities (responding to 20% mortality gap): Physical health checks for service users checking for high cholesterol and diabetes, from a finger prick test.

To support our approach to capturing the voice and views of people we have:



- ✓ Developed a Trust wide approach to involvement called 'Connecting People' in partnership with leads from Calderdale and Kirklees who have the same approach.
- ✓ Working towards formal consultation on our older people inpatient transformation, following extensive engagement with partners and communities.
- ✓ Maintain a Trust wide approach to developing surveys which now all include equality monitoring as standard.
- ✓ Quarterly insight reports on the voice and views of people with contributions from our Governors, Healthwatch and partners are developed quarterly with you told us, we listened published on our website.
- ✓ Supported the insight for the Trust wide Quality Strategy ensuring we captured everything we could that reflected the voice of service users, families, and carers.
- ✓ Used what we already know to inform the changes to Care Programme Approach (CPA), so the views of service users, carers and families were at the heart of our design.
- ✓ Continue to work in partnership with the Third sector to co-design and develop our service offer through grant scheme allocations.

To support our approach to workforce we have:

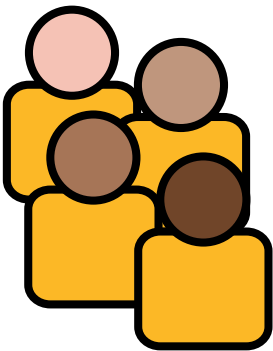


- ✓ We continue to offer a range of support to our staff.
- ✓ We continue to provide our workforce with equality and diversity mandatory training.
- ✓ We are now rolling out a co-designed enhanced equality and inclusion training package as essential to job role for all leaders and managers.
- ✓ We continue to deliver monthly lunch box talks using films created by our community with an equality theme.
- ✓ We continue to support our international nurses with pastoral care and buddying.
- ✓ We continue to progress the work of 'All of you: Race Forward' which identifies how we will tackle racial abuse and harassment of staff by people who use our services.
- ✓ We rolled out the FLAIR survey for the first time this year. The survey will be delivered for a further 2 years so we can benchmark our progress.

We can demonstrate an improvement in outcomes and experience for specific groups protected under the equality act, including carers:

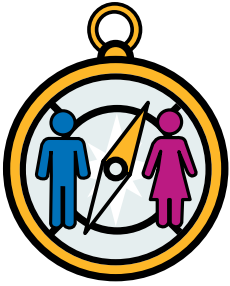


- ✓ Disabled Staff network
- ✓ Monitoring and developing action because of Workforce Disability Equality Standard (WDES)
- ✓ Disability matters event open to all staff
- ✓ New co-designed disability policy and plan on a page to highlight key actions
- ✓ Learning disability health checks
- ✓ Disability physical health checks for people with severe mental illness are delivered in partnership with our places
- ✓ Green light toolkit for people with a learning disability
- ✓ STOMP and STAMP approach to reduce over medication of adults with a learning disability
- ✓ Disability awareness through visual stories and campaigns throughout the year
- ✓ Creative interventions through our linked charity 'Creative Minds'



- ✓ Race Equality and Cultural Heritage (REACH) Staff network
- ✓ Dedicated leadership programme
- ✓ Monitoring and developing action because of Workforce Race Equality Standard (WRES)
- ✓ Forensic services deep dive to support culturally competent care which has led to a clear action plan.
- ✓ CAMHS Kirklees deep dive to identify and address inequalities in access to services which has resulted in funding 2 local VCS groups to improve the health of South Asian and Black young people.
- ✓ Continue to report on improvements to RACE equality data using our equality dashboard.
- ✓ Attended for the second year the Asian Professional Network Association (APNA) annual event with clinicians. Last year it led to clinical involvement in programmes and training.
- ✓ Celebrated South Asian heritage month with stories and cultural cuisine in our canteen and onwards.
- ✓ Reducing hate crime and incidents by working in partnership with local crime prevention officers to host several sessions for staff in each place location.
- ✓ Proud to support in partnership the 'Root out Racism' campaign.
- ✓ Specific cultural creative activities on our wards and in communities.

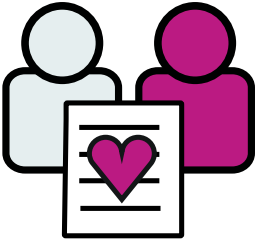
Quality improvement work is underway around service users with dementia and oral hygiene.



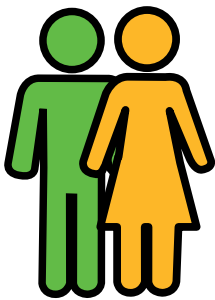
- ✓ Pronoun awareness, badges, and a film to raise awareness developed by young people has been shared with staff. A commitment to add this to staff signatures is being progressed.
- ✓ Celebrated trans gender awareness day in March with a staff development session led by a panel who answered openly any questions people had.
- ✓ Annual 'Pride' month long celebrations attending community events, sharing stories, media campaign and screen savers.
- ✓ Rainbow badge pledge
- ✓ Visible symbols of support in our built environment including a rainbow crossing and flags
- ✓ Transgender policy guidance now developed and available on the intranet. This includes a quick guide and tips for staff.
- ✓ Continued investment in 'Trans-Barnsley' a group hosted by our recovery college, with a visible identify and presence.
- ✓ Gender neutral toilets in all our estates
- ✓ Specific creative interventions through our linked charity 'Creative Minds'
- ✓ A new working group to focus on further action has been set up. The LGBT+ group will look at the good practice framework against our approach.



- ✓ Widening our faith connection in each of our places to ensure we can support people in our services.
- ✓ Prayer rooms in our buildings
- ✓ Pastoral care talk line
- ✓ Befriender service in all inpatient services
- ✓ Newsletter for inpatients
- ✓ Digital pastoral offer
- ✓ Celebration of faith calendar through communication, social media, and staff stories
- ✓ Improving prayer facilities by introducing Friday prayers through a volunteer Imam at our Fieldhead hospital site – open to all.
- ✓ Improving our ablution facilities for prayer by adding a facility at Fieldhead hospital Wakefield – due to be complete by 2024.
- ✓ Guidance for fasting and a prayer pack is now available and will be shared with teams in line with faith calendar to support staff and service users.
- ✓ Celebrating International Men's Health Day using media, stories and events



- ✓ Thriving staff network with a dedicated post to progress support to all carers
- ✓ Identifying carers and recording of carer status for people who use services.
- ✓ Identifying carers and recording of carer status for our workforce
- ✓ Successfully rolling out the 'carers passport'
- ✓ Carers week celebrations including a community film, social; media stories and a celebration event.
- ✓ One of only a few Trusts to achieved Carer Confident status Level 1 and 2 – with our sights set on level 3 in 2024.
- ✓ Now part of 'Triangle of Care' working closely with services and teams to roll out a framework.
- ✓ Co-designed training on carers is now being delivered across our Trust, including our executive team.
- ✓ Support to carers for creative interventions and shorts breaks through a dedicated grant fund.



- ✓ Menopause staff support group in place
- ✓ The Trust have a perinatal mental health service which also includes peer support workers.
- ✓ There are male and female focussed activities in all our recovery colleges.
- ✓ Celebrating women through International Day of Women using media, stories, and events
- ✓ Continue to develop creative and recovery interventions with a gender focus through 'Creative Minds'
- ✓ Celebrate international men's health day using media, stories, and events.

Recovery college and reach into the Asian population working with a local mosque to understand and improve our reach, accessibility, and delivery.

Focus on faith and religion: Contact made with local religious leaders to come along and attend a ward staff meeting to allow time for question-and-answer sessions. Increase in chaplain attendances.

8. A focus on addressing inequalities in health

Health inequalities are unfair and avoidable. To reduce health inequalities, we need to act to tackle them through actions with a specific focus on disadvantaged groups and deprived areas. We know that there are groups who are more adversely impacted. The Trust are using the CORE20PLUS5 approach to identify the target audience and the areas of improvement.

Work took place in 2022-2023 to address inequalities in Kirklees Child and Adolescent Mental Health Services (CAMHS), Forensic and Learning Disability services. The table below sets out our progress:

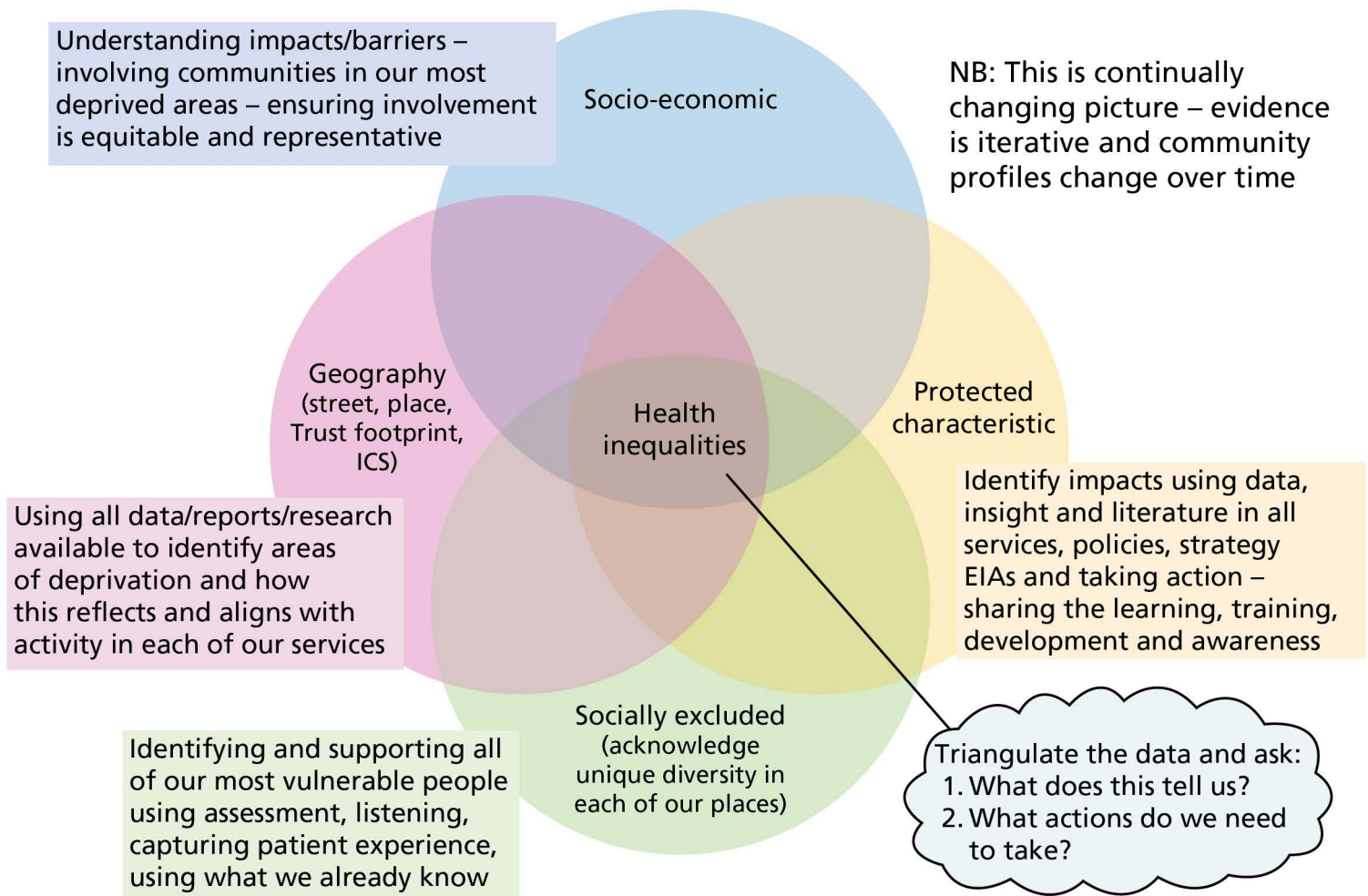
Inequality identified	Our progress
<p>Kirklees Child and Adolescent Mental Health Services (CAMHS) used our interactive tool to identify the postcodes of activity. The data told us that there were 2 specific areas that are underrepresented in services. These postcodes had a higher-than-average population of Asian, Asian British, and Black, Black African, Caribbean population.</p>	<p>Further work to investigate the data led to groups being identified. The team immediately improved their service information to ensure it is accessible.</p> <p>Focus groups were also held in postcode locations to engage young people. They told us, we should make our service more visible on social media, promote services better and be part of school PSE lessons. A wellbeing champions initiative has been set up within schools too.</p> <p>Parents, carers, and families were also engaged and most wanted more information and sign posting.</p> <p>A full report of this work can be found on: Engagement and consultation - South West Yorkshire Partnership NHS Foundation Trust</p> <p>The CAMHS team are now working with 2 voluntary and community organisations to directly target young people from Asian, Asian British, and Black, Black African, Caribbean population. These organisations have been funded to co-design a future</p>
<p>A deep dive into Trust admissions data for Forensic services indicated service users aged 18 to 64 from mixed, Black, and other ethnic groups and Asian population aged 35 to 64 are more likely to be admitted and detained.</p>	<p>The report concluded in October 2022 and several recommendations have been made. These recommendations are now being progressed by the service. A full report of this work can be found on: Engagement and consultation - South West Yorkshire Partnership NHS Foundation Trust</p> <p>In parallel, work is to start with our communities through recovery colleges and wider involvement initiatives to identify and co-design solutions with community partners. This work will continue into 2024.</p>

Inequality identified	Our progress
<p>Learning disability services have been doing lots of work to ensure that people receive health checks to ensure we address inequalities in health outcomes for people who have a learning disability.</p>	<p>The Trust decided to look further into learning disability services as part of the equality delivery system (EDS2) in January 2023. The deep dive into learning disability services covered the whole pathway from the perspective of each protective group. A full report on our findings can be found here. How well are we doing? - South West Yorkshire Partnership NHS Foundation Trust</p> <p>Further work to look at the service level data using the NHS England and Improvement took place following this review and a programme of work to reduce waiting times is ongoing.</p> <p>We are also connected into the work on inequalities in each of our places and have seen some excellent improvements recently in the uptake of annual health checks for people with a learning disability particularly in Barnsley and Calderdale.</p>

Inequalities in health, housing, income, barriers to accessing services and discrimination remain and there is need for improvement across each of our places. We know these inequalities put people at greater risk of ill health, mental ill health, or distress. We also know that people who are mentally ill, those with a learning disability, and those who live in poverty face wider health consequences as a result. Systemic racism and prejudice also affect our Black, Asian and minority ethnic communities. More work needs to be done to ensure our services are accessible to everyone and reflect the populations we serve by ensuring we understand, inform, communicate, and involve those communities.

Our approach to improving and developing services is through the comprehensive use of Equality Impact Assessments (EIA) in every service. Our service EIAs include population data and service activity data (including staff profiles) broken down by each protected characteristic. This information means that we can identify at a service level any under or over representation in services, determine if the workforce is reflective of the population which may determine a barrier for access and if there are specific areas of inequality these groups experience which can be picked up in clear action plans. We have over 170 services who review their EIAs on an annual basis. EIAs also drive Trust policies and ensure that the approaches we develop consider and mitigate against any barriers for protected groups.

In addition, we also use a service improvement approach. We are using the Kings Fund tool to help us drill down further into the service level data so we can further capture and collate insight to inform a more targeted approach. The diagram below sets out our Trust approach:



Going forward into 2023 -2024 the Trust golden thread and priority programme to work in partnership with each of our places will continue to ensure the Trust retains a focus on addressing health inequalities as a priority.

9. Governance

The Trust’s Equality Inclusion and Involvement Committee and sub-committee has been established to act on behalf of the Board and to ensure the Trust improves the diversity of its workforce and embeds diversity and inclusion in everything it does. The Committee oversees the implementation of the Equality, Involvement, Communication and Membership Strategy to improve access, experience, and outcomes for people from all backgrounds and communities. This includes people who use, work and volunteer for our Trust services and those who work in partnership with the Trust with the strategic aim of improving health, care, resources and making our Trust a great place to work.

The Trust works with a range of partners across the system including West Yorkshire and South Yorkshire Integrated Care Board (ICB) to ensure a partnership approach to system transformation. In addition, senior leaders work at a place-based level, led by local authorities and commissioners to ensure the Trust is part of local decisions and can respond in partnership to protect and support the most vulnerable. The Trust uses the Joint Needs Assessment (JNA) intelligence to understand the local population and the Equality Impact Assessment (EIA) as a tool to inform service impacts, identify actions and ensure service improvement.

10. Our forward view

The Trust will continue to focus on providing high quality care that is culturally and spiritually appropriate with staff who are reflective of the local population through inclusive recruitment and retention. We will also ensure all our priority programmes are driven using robust data and insight that ensure we hear the voice and views of everyone and identify and address health inequalities. Our Trust objectives set out in our Equality, Involvement, Communication and Membership (EICM) Strategy and the actions are set out below.

11.1 Trust equality objectives

1. To ensure we gather good quality data which can be used to support performance monitoring of service use and improve outcomes among those from the most deprived neighbourhoods including Black, Asian, and Minority Ethnic communities, people with a disability including Learning Disability, ASD and Autism and people who identify as LGBTQ+, young people and carers.

Action 2024/2025:

- Continue to promote the 'All of You' campaign to improve data quality and collection for all protected groups.
- Ensure we record carers, capture digital and communication preferences
- Continue to improve the Equality, Involvement, and Inclusion (EII) Committee dashboard and metrics; using case studies to demonstrate our progress.
- Continue to improve the use of Trust equality data using the data strength framework.
- Continue to resource and support the use of the Kings Fund 'Health Inequalities' tool.
- Ensure Patient Carer Race Equality Framework (PCREF) metrics form part of routine capture and reporting.
- To collect, analyse and publish information in the annual report 2024/25 in relation to health inequalities to fulfil the [section 13SA of the National Health Service \(NHS\) Act 2006](#)
- Deliver Equality Delivery System (EDS) 2022
- Identify socio-economic as a deprivation indicator which can be used in Equality Impact Assessments (EIAs) to ensure we consider impact alongside protected groups and carers.

2. To ensure we provide person centred care which promotes inclusive, culturally and gender sensitive services, delivered by a diverse and representative workforce who seek to understand and pro-actively address inequalities and challenge discrimination

Action 2024/2025

- Reach out to a range of community faith networks to improve the Trust offer of 'Spirit in Mind'.
- Continue to develop awareness of different religions and beliefs through information and communication channels.
- Continue to celebrate the faith calendar giving visible parity to all religion and beliefs.
- Map community befriender offers in each of our places and embed in volunteer services.
- Explore the use of volunteers as creative practitioners in inpatient settings.
- Continue to increase our Creative Minds offer using creative interventions in partnership with Voluntary and Community Sector (VCS)
- Continue to work with and co-design our service offers in partnership with the VCS sector.
- Continue to build on our commitment to carers by delivering Triangle of Care (TOC) and carers training to staff).

3. To ensure we work in partnership with partners and communities including the voluntary, community and faith sectors to improve access to services and ensure those from our most deprived neighbourhoods have equal access to pathways of care

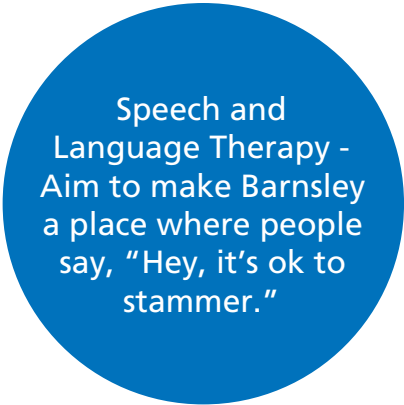
Action 2024/2025

- Ensure every service has an up-to-date EIA and accompanying action plan to address impacts.
- Ensure staff are compliant with Equality Diversity and Inclusion (EDI) mandatory training.
- Ensure managers and leaders as part of essential to job role complete the enhanced EDI training.
- Offer staff equality, diversity and inclusion development sessions.
- Continue to reflect images and language in all information/ social media and publications that are inclusive of everyone.
- Further embed the accessible information standard (AIS) /disability policies and develop through development and a short how to guide.
- Using a change approach and quality improvement (QI) methodology in service improvement areas to address health inequalities and develop case studies.
- Review our estates using the 'PLACE' audit with representatives who reflect our communities.

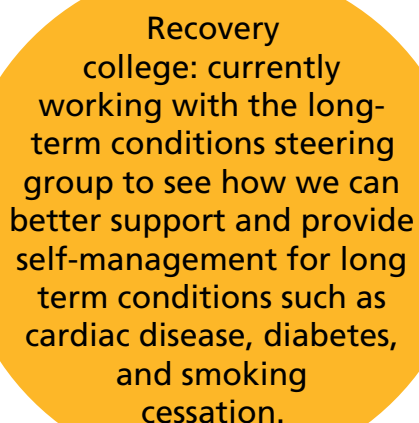
4. To develop and sustain an equality competent organisation that demonstrates inclusive and diverse leadership and workforce addressing the balance of power and ownership at all levels and improve equality of opportunity for staff and volunteers

Action 2024/2025

- Focus on inclusive recruitment & retention at all levels in the Trust.
- Commence a co-produced approach to leadership and talent management.
- Continue to deliver the 'Flair' survey to understand racial bias and deliver an action plan on improvements.
- Continue to deliver on All of Your Race Forward
- Continue to increase the recruitment of diverse peer support workers.
- Continue to support staff networks.
- Assess against the national LGBT framework.
- Enhance sense of belonging by delivering on EDI High Impact Action Improvement Plan
- Delivery on recommendations from Inclusive Leadership Culture Programme



Speech and Language Therapy - Aim to make Barnsley a place where people say, "Hey, it's ok to stammer."



Recovery college: currently working with the long-term conditions steering group to see how we can better support and provide self-management for long term conditions such as cardiac disease, diabetes, and smoking cessation.

11.2 Trust wide involvement objectives

1. To ensure people who access health and social care services, families, carers, and the public are involved in shaping health and care proposals and plans. To use what we already know as a starting point, so we do not repeat conversations or create involvement fatigue.

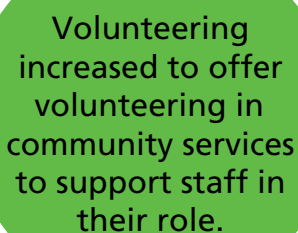
Action 2024/2025

- Involve local people in the development of the Trust Strategy, Equality, Involvement, Communication and Membership Strategy, Digital and Clinical Strategy
- Continue to develop a Trust wide understanding of involvement through training.
- Ensure that all priority programmes use insight data and involvement to drive activity.
- Continue to transfer the offer of a central survey monkey account to ensure management of surveys including use of equality monitoring.
- Develop a Trust wide insight bank to support programmes, strategy development and design.
- Develop a framework for consultation using the Older People Service (OPS) transformation approach and learning.

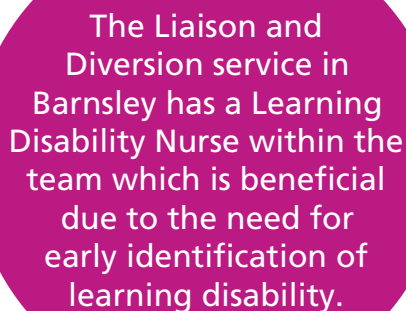
2. To use equality and demographic data to ensure we inclusively involve the right people at the very beginning of a process to influence the development and design of services

Action 2024/2025

- All involvement approaches include a clear stakeholder map to help ensure we reach the right target audience as part of a planned approach to involvement.
- Joint needs assessment (JNA) and demographic data is used and analysed to ensure we use the right methods and approaches for involvement.
- Increase membership involvement through an approach which includes dedicated web page, newsletter, and place-based forums.
- Continue to increase representation of young people on the members council and identify an inclusive approach.
- Continue to work with place-based colleagues in the Voluntary and community sector (VCS) and Healthwatch to improve children and young people involvement.
- Continue to capture equality data to demonstrate involvement in decision making so that it is reflective and representative.
- Increase the diverse representation of volunteers in the Trust.



Volunteering increased to offer volunteering in community services to support staff in their role.



The Liaison and Diversion service in Barnsley has a Learning Disability Nurse within the team which is beneficial due to the need for early identification of learning disability.

3. To use the assets in our communities and create the right conditions to involve local people, going to where people and ensuring they remain involved.

Action 2024/2025

- 'Connecting People' programme will deliver a minimum of 4 training sessions in a year to increase our asset database.
- Continue to roll out and promote the asset-based approach, promoting internally for use by the Trust.
- Continue to recruit a diverse pool of assets to ensure reach into all our geographical locations, groups, and settings.
- Utilise our assets to deliver programmes of work ensuring they use the resources available.
- Continue to support our governors to involve people in our local communities.
- Work with the voluntary and community sector organisations in each of our places to deliver programmes of work.
- Continue to work with each place including Healthwatch to support involvement of communities in the delivery of place plans.

4. To ensure we are an exemplar in co-production - through equal and reciprocal relationships with communities and professionals; recognising that both partners have vital contributions to make and ensuring we have a clear reward and recognition approach.

Action 2024/2025

- To develop several tools which can support co-production.
- To develop and deliver development sessions on co-production approaches to managers.
- To gather case studies which demonstrate our approach to co-production.
- To roll out our reward and recognition approach across the Trust
- Increase our Peer Support Worker approach to ensure we have lived experience represented in all service settings.
- Deliver a volunteer to career approach in targeted areas of deprivation.

5. To record, report, and publish insight so people can see the information driving our service decisions and actively demonstrating how we are using the intelligence we capture to deliver service improvement and patient centred outcomes

Action 2024/2025

- To use what we already know as a starting point by developing a framework to capture insight.
- To continue to ensure we record and report involvement activity using templates and recording equality data.
- To publish timely involvement reports on the website and provide updates.
- To align our approach with our service improvement, change and QI approach.
- To ensure involvement and insight reports inform all strategies.
- To continue to consolidate insight through a quarterly insight report and update using 'you told us, we listened'.
- To develop a patient stories approach that is trauma informed.

11.3 Our legal and statutory obligations

The Trust is committed to being responsive and supporting the needs of the diverse population it serves, reflected in the Trust's values. Equality and diversity are not an 'add on,' they are central to all we do as a provider of services, as an employer, and as part of the public sector. People who use the Trust's services are all different and diverse in their requirements and needs. Equality is about creating a fairer organisation in which everyone can fulfil their potential. Diversity is about recognising and valuing difference in its broadest sense and treating everyone with fairness and understanding, not necessarily treating everyone the same.

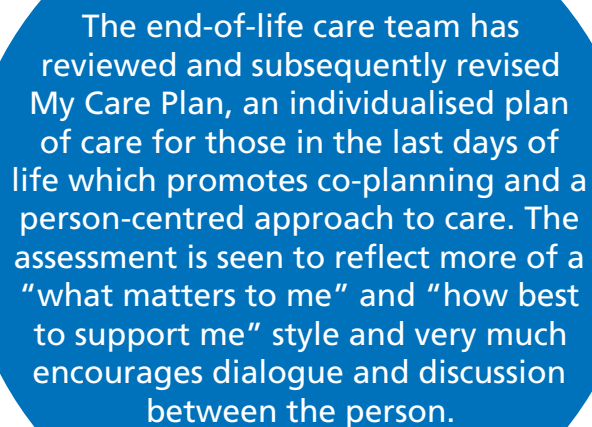
To ensure we comply with our statutory responsibilities under the Equality Act 2010, especially the Public Sector Equality Duty (PSED) and the Health and Social Care Act 2022, we must consider equality and involvement at each stage of service delivery including as part of any decision-making process. Information on the obligations we must work to can be found on the following links:

[The Equality Act 2010](#)

[Public sector equality duty](#)

[NHS Constitution](#)

[Health and Care Act 2022 \(legislation.gov.uk\)](#)



The end-of-life care team has reviewed and subsequently revised My Care Plan, an individualised plan of care for those in the last days of life which promotes co-planning and a person-centred approach to care. The assessment is seen to reflect more of a "what matters to me" and "how best to support me" style and very much encourages dialogue and discussion between the person.

If you require a copy of this information in any other format or language please contact the Trust.

إذا كنت تحتاج إلى نسخة من هذه المعلومات بأي تنسيق أو لغة أخرى، فيرجى الاتصال بـ Trust. (Arabic).

اگر شما به یک نسخه از این اطلاعات در هر قالب (فرمت) یا زبان دیگری نیاز دارید، لطفاً با بنیاد (Trust) تماس بگیرید. (Farsi).

Ha a jelen információk másolatát más formátumban vagy nyelven szeretné megkapni, akkor kérjük, hogy lépjen kapcsolatba a trösztel. (Hungarian)

ئەگەر پوونوووسی ئەم زانیاریانەت بە هەر زمان یان فۆرماتیکی دیکە پێویستە تکایە لەگەڵ ئیمە پێۆهندی بگره. (Kurdish Sorani).

Jeśli potrzebują Państwo uzyskać kopię niniejszej informacji w innym formacie lub języku, prosimy o kontakt z Funduszem Zdrowia. (Polish)

Se necessitar de uma cópia destas informações em qualquer outro formato ou idioma, entre em contato com a Fundação. (Portuguese)

جے تہانوں ایس جانکاری دی اک کاپی دی کسے ہور فارمیٹ یا بولی وچ لوڑاے تے مہربانی کر کے ٹرسٹ نال رابطہ کرو۔ (Punjabi Pakistani)

Dacă aveți nevoie de o copie a acestor informații în orice alt format sau limbă, vă rugăm să contactați Trustul nostru. (Romanian)

اگر آپ کو اس معلومات کی ایک کاپی کی کسی دوسرے فارمیٹ یا زبان میں ضرورت ہو تو براہ مہربانی ٹرسٹ سے رابطہ کریں۔ (Urdu)