

Equality Performance Hub 2021 Annual Summary Report



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Introduction

Our Equality Performance Hub is a clear and comprehensive online tool which captures and publishes information on the diversity of our organisation. It enables us to identify the experience and outcomes of the people who work with us or use our services. We have to be open to what our data says and evidences about the characteristics of the people who are accessing our services; and those that are not. We have to be open about how health outcomes may differ for people across the protected characteristics. This can mean challenging ingrained and institutional processes and attitudes to lead to more open and transparent services; this is at the core of our organisational strategy 'People, prevention and partnerships 2020 - 2025'.

Our organisational strategy describes how we plan to improve the experience, wellbeing and health of people who use our services, their families and carers, our staff and the communities we serve. The strategy responds to local needs and national priorities, including the NHS Long Term Plan. It is based on needing to do things differently - both in terms of how we work and how we work with others - and informed by feedback about what we do well and where we need to improve.

How does it support patients and their care?

Capturing data gives us the tools to support and deliver our vision of 'Outstanding care and treatment you can be confident in'. The data assists to monitor and evaluate that we are delivering safe, effective, quality patient care and are the provider, employer and partner of choice. The data also informs and supports our Equality Reference Groups (ERG) to set Specific, Measureable, Achievable, Realistic and Timely (SMART) actions to address any identified inequalities in service provision.

The data might also be used by the people who access our services, local charities and commissioners to examine barriers in access or performance outcomes. Publishing this information online is an important part of being more transparent, it enables us to better communicate how we are tackling inequalities over time and assists us to improve the high standard we aim to deliver.

What data do we collect?

We collect extensive data across the protected characteristics which can be viewed at our online Equality Performance Hub.

<http://www.sussexpartnership.nhs.uk/equality-performance-hub-equality>

This includes:

Services	Workforce
<ul style="list-style-type: none">• Incidents• Interpreting & Translation• Membership	<ul style="list-style-type: none">• Clinical Excellence Awards• Employee Relations• Leavers, Redundancy and Maternity

<ul style="list-style-type: none"> • Detentions under the Mental Health Act • Care Delivery Services • Recovery College 	<ul style="list-style-type: none"> • Recruitment • Training • Volunteers • Workforce
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How do we use the data to make improvements to quality?

The Trust has established an Equality, Diversity and Human Rights steering group which is chaired by the Chief Executive. Reporting to the steering group are six equality reference groups, each chaired by an Executive Director (or nominated deputy) and comprised of staff, patients, carers, the third sector and partner organisations.

The Equality Reference groups use the performance data to lead on a quality improvement initiative. The initiative is approved at Board and aims to address a local or national inequality in healthcare provision or workforce culture.

Reference Group	Initiative	Status
Age	TBC	In discussion
Disability	Reasonable and Adequate adjustments	In Progress
Gender & Families	Addressing the Gender Pay Gap and Family rooms at SPFT	In Progress
Race	BAME Disparity Programme	In Progress
Sexual Orientation & Gender Identity	Stonewall Submission	In Progress
Spirituality	A Spirituality Network	In Progress

1. Better Health Outcomes

EDS2 Status: **Achieving**

Better health for the Trust is around achieving outcomes to help people live independently, to promote mental wellbeing, reduce health inequalities and improve transition.

Below are examples of how the Trust has designed and delivered services to meet the health needs of the local communities within Sussex and the surrounding areas for which we provide services. Please note that some services have been put on hold due or held virtually to the Covid - 19 pandemic.

1. The Trust has a clinic for individuals who identify as transgender / have gender dysphoria and who have severe and/ or complex mental health needs. The clinic offers a safe space where individuals are listened to and respected. They are run by a higher trainee who has experience and training in the mental health needs of the trans population, and knowledge/experience of what happens within a tertiary gender identity clinic (Charing Cross Gender identity clinic)

2. We have established groups across our in-patient wards to improve services and experience of in-patients during their stay. These are patient led by an elected chair and encourage thinking around improving equality. Based on direct patient feedback we have implemented telephone and video language interpreting service to predominantly improve the experience of patients where English is not their first language
3. I-rock is a service in the Hastings and Rother area that provides advice and support on emotional and mental wellbeing, jobs, education and housing. The service is aimed at 14 -25 year olds and was commissioned to address the needs of the local community.
4. Before the Covid 19 pandemic, each week children from the Fizzy Fish Nursery visit the residents of Lindridge Care Home in Hove. They plan different activities for the children and residents to jointly participate in, including painting, singing, cooking and playing games in the garden.
5. The Springwell Project was launched to enable and support people with learning disabilities (PWLD) and complex needs and their families/carers, to gain skills to better manage and engage in the planning of their own healthcare. We want to significantly increase the number of PWLD and complex needs currently taking an active part in their specialist learning disability healthcare. Underpinning these aims was the integral importance of developing a space to hear what PWLD need and want from services. We wanted to understand how our services look from their point of view, what impedes engagement and what helps.
6. We have designed hospital passports for people that have a learning disability with physical health need so that when a patient arrives at an Acute A&E their personal preferences are met and understood by our partner organisations.
7. The Trust has been awarded the Gold Level LGBTQ inclusion award at Langley Green Hospital. This has included training to front line staff and resulted in alterations to the building to make gender neutral spaces. The awarded was granted by LGBT Switchboard and the Trans Alliance. This year Millview Hospital will be working towards achieving the award.
8. The Trust offers video language interpreting to two Acute hospitals, Langley Green and Millview to service their Places of Safety
9. We have made our public facing website fully accessible for those with communication or accessibility needs. Our public facing website can now be viewed in a way that's best for them. The Recite Me software installed can provide a text to speech function, supporting aids and language translation in over 100 languages.
10. Training of junior medical staff in LGBTQ mental health inequalities and needs continues to be carried out by Consultant Psychiatrist Alison Chalu

11. Transgender awareness training has been rolled out throughout our services by our employees Jamie Willo & Drew Brigden-Slack
12. We have a group of fully trained Experts by Experience that sit on a number of our CDS leadership meetings. This lives by the values of the social movement '*Nothing About Us Without Us*' where no policy should be decided by any representative without the full and direct participation of members of the group(s) affected by that policy

Equality and Human Rights Impact Analysis

We are committed to ensuring that our services are delivered in a fair and equitable way and in order to do this we know that we need to listen to, involve and be accountable to our patients, carers and all other stakeholders. Completing Equality and Human Rights Impact Analysis on all policies and high-level service and workforce decisions, supports us to do this.

In May 2021 SPFT revised its EIA processes after a review following national guidance. Whilst still robust, the new process includes a screening tool alongside an extended EIA and Due Regard form. Training to implement these changes will continue to be facilitated monthly.

2. Improved Patient Access and Experience

EDS2 Status: **Achieving**

Patient access and experience is a core part of our values. For the Trust this represents patients respect, dignity, co-production and working together to improve access. Our ambition through our Clinical Strategy is to provide a single point of access to ensure that people in crisis can access our services 24 hours a day.

We provide NHS care and treatment for people living in Sussex, Hampshire & Kent. We are rated 'good' overall by the Care Quality Commission and 'outstanding' for caring

Our mental health services provide care and treatment for people with conditions such as psychosis, depression, anxiety, dementia and personality disorder. Our specialist learning disability services provide community and inpatient care for people with complex health needs which can't be met by other services. We have a number of services that provide very specialist care for people with complex health conditions and social care needs.

We provide care in people's homes, in specialist clinics, hospitals and GP surgeries. Our services are aimed at children, young people and adults of all ages and many are provided in partnership.

This report refers to data collected from Carenotes for a period of 01 April 2020 to 31 March 2021. Our headline data tells us:

- 103,363 caseloads were open to people accessing our services during 2020/21.
- 53.8% were female and 45.8% were male. 0.3% identified as transgender

- The majority of patients were aged 21- 30 and accounted for 18% of all caseloads open followed by 70+ that accounted for 16.6%. This was a reversal of last year, when the 70+ age group was highest, accounting for 17.7% of all caseloads open followed by 21- 30 years old, accounting for 15.4%. This reversal is part of a trend that has shown a decline in the older age group each year, while the group in their twenties increased each year. The higher percentage of the younger caseload group is centered in Brighton & Hove – the older service users retain the higher percentages in East and West Sussex.
- Children accounted for 8.59% of mental health trust attendances - a significant drop from last year's figures of 14.9%. This may be an effect of the pandemic lockdowns, but that would need further research to consider.
- 332 patients declared that they had or do consider themselves to be transgender, whilst this is a small figure in comparison to the number of caseloads open in the year it represents an ongoing increase in the data collection and is a 50% increase from last year's number (221).
- Of those that used our services 74.2% identified as White British and 5% as BAME, which continues a trend of small increase in the BAME % each year for the past 3 years, and brings it exactly in line with ONS 2011 figures for the Sussex population.
- Only 31.3% of all episodes openly declared their sexual orientation during 2020/21. This suggests that during 2021/22 the Trust will need to improve on the Sexual Orientation Monitoring Information Standard (SOMIS).
- Only 7% of disabilities were captured on Carenotes.

It should be noted that data should be interpreted with care due to low data capturing to the protected characteristics on Carenotes

Captured below is the headline data for service access across the protected characteristics in 2020/21. The imbalances and disparities highlighted will be mitigated through co-production between our Care Delivery Services, patients and wider stakeholders. This data only captures the experience of LGB and Heterosexual patients, hence the acronym is only LGB.

Adult Services

West Sussex

West Sussex provided the largest number of care and treatment cases for 37,300 people during 2020/21 (35,397 community service users and 1,903 in-patients).

- 75.6% identified as White British followed by, any Other White Background (4.8%) and BAME (4.1%).
- While those aged 71 and above account for 27.3% of patients and service users in West Sussex, 21-30-year-olds accounted for the second highest age group (20%).
- 42.1% identified as male and 0.1% identified as transgender. 57.5% that accessed West Sussex services were female.
- LGB patients represented 1.4% of all caseloads open.
- 22.3% of our patients who disclosed their religion and belief defined as Christian, followed by any other religion (1.7%). However, 71.5% did not

disclose their religion which may indicate we may need to train our staff in asking patients about their spiritual needs.

- 27 patients within the community identified themselves as deaf or hard of hearing, and 25 patients are blind or have partial vision.
- 694 language interpreting sessions were delivered in West Sussex (including CHYPS) for 37 different languages during 2020/21.
- The top five languages used were Arabic (81 sessions), German (55 sessions), Hungarian (54 sessions), Spanish (48 sessions) and Mauritian (43 sessions)
- 32 British Sign Language (BSL) sessions took place in West Sussex, the highest number of BSL requests within the Trust.

Brighton and Hove

Brighton & Hove provided care and treatment for 13,515 people during 2020/21 (12,717 community service users and 753 in-patients and 45 people in Primary Care)

- The largest age group accessing the services are aged between 21- 30 and account for 20% of caseloads open, a significant over representation against the 2011 Office for National Statistics (ONS) data (10%).
- Over 70-year-olds accounted for 15.2% of all in patients during this period.
- 85 patients identified as transgender and 44.5% of all caseloads open were male.
- 9% of adults who accessed our services in 2019/2020 identify as BAME which is under the 2011 ONS for Brighton & Hove.
- Patients who are single account for 48.4% of patients while 11% are married or in a civil partnership.
- 3.5% of patients who specified their sexual orientation in 2020/21 identified as lesbian, gay or bisexual, while 75.7% were not specified. The percentage not known or specified has reduced by 20% over the past year.
- 33% disclosed that they had a religion or belief. From the data recorded 16.7% identified as Christian. 3.8% accounted for Atheist service users and patients, another 3.8% identified as 'Any Other', and 3.4% as Agnostic.
- Brighton and Hove accounted for the highest requests for language interpreting (739) in 2020/21.
- 30 different languages were used in Brighton and Hove for our services in 2020/21, the top five languages used were; Arabic (180 sessions), Bengali (98 sessions), Farsi (85 sessions), Polish (74 sessions), Pashto (61 sessions).
- 7 British Sign Language sessions were delivered in Brighton & Hove in 2019/2020.
- Both spoken language and BSL interpretation sessions were halved in number in the area since the previous year – a likely impact of the pandemic lockdowns.

East Sussex

East Sussex provided care and treatment for 23,121 people during 2020/21 (20,638 community service users and 1,529 in-patients and 954 people in Primary Care)

- The largest age group of patients accessing services in East Sussex is 70+ (20.2%) and 21-30-year-olds account for the second largest group (19%). Services have been reshaped in the East Sussex re-design to meet the needs of the aging demographics.
- 3% of people who provided their sexual orientation identified themselves as LGB. 57.3% did not provide this data.
- 78.7% of patients accessing services in East Sussex define themselves as White British. 3.8 % define themselves as BAME against a local population of 4%.
- 55% of all service users and patients identified as female and 44.8% male
- 26.7% of the 42.7% who identified their religion or belief belonged to the Christian faith .5.6% identified as 'Any other'.
- 7.4% of people accessing our services who identified as having a disability had a mobility impairment.
- 44.7% of people accessing our services were single, and 19.6% were married or in a civil partnership.
- 31 different languages in East Sussex were requested for 345 sessions. The top five languages used in East Sussex were Arabic (58 sessions), Portuguese (37 sessions), Turkish (35 Sessions), Farsi (33 Sessions), and Bulgarian (26 sessions).
- East Sussex accounted for 28 British Sign Language interpretation sessions in 2020/21.

Children and Young Peoples Services

Our services provided care and treatment for 21,305 children and young people across Sussex and Hampshire the highlight data is shown below.

Sussex

Sussex provided treatment for 13,486 children and young people.

- 99% of patients were treated in our community services.
- 45% of patients treated in East Sussex are boys.
- 83 children and young people identified themselves as transgender in Sussex, around a third more than the previous year.
- 5% of children and young people identified themselves as BAME and 5% as White Other
- The sample size for sexual orientation is very small (18% of all cases). it does identify that 136 young people disclosed that they are lesbian, gay or bisexual.
- 9% of patients identified as Christian.

Hampshire

Hampshire provided treatment for 7,653 children and young people in 2020/21.

- 81% of children and young people identified as White British and of the data collected 4% of patients defined as BAME, a slight under representation against the demographics (5%).
- 54% of children and young people identified themselves as male and 16 services users as transgender.

Kent

With only 11 cases, there are no clear conclusions that can be drawn around service provision in Kent.

Forensic Healthcare

Forensic healthcare provided care and treatment for 2,588 people during 2020/21 (2,431 community service users and 157 in-patients). This was an increase of 38% from last year's total.

- The majority of patients in our acute secure and forensic services are aged 21-40 (52.8%). 4.1% of patients in our secure and forensic services are at retirement ages.
- There is an over representation of BAME patients in our acute services (10%) against the 2011 census (6.2%) and against BAME patients accessing all services Trust-wide (5%).
- Men represent 76% of our acute secure and forensic services and 72% in the community.
- 36.5% patients accessing our secure & forensic services defined themselves as having a religion or a belief. 26.7% identified as Christian.
- 67.9% of patients accessing our acute secure and forensic services are single. 6.9% are married or in a civil partnership.

Learning Disability

Our Learning Disability Services provided care and treatment for 5,534 people during 2020/21 (5,514 community service users and 20 in-patients)

- 75.1% of service users identify as White British and 300 BAME individuals accessed our Learning Disability Services during 2020/21.
- The majority of patients accessing our residential or community learning disability services are male (54.4%).
- 77.6% preferred not to say/unidentified as having a religion or belief. The highest faith declared was Christian (14.5%).
- Patients across community and inpatient LD services are predominantly aged 21-40 years old (54.5%) and numbers decrease with age.
- 86.2% of patients and service users declined to identify their sexual orientation. 1.7% identified as LGB, and 27.3% identified as heterosexual however the sample size is too low to draw to any credible conclusions.

- We provide hospital passports in easy read formats as well as other documents to support communication. We also ensure through our Carenotes system that the Accessible Information Standard is captured for those that require information in different formats.

In-patient and community Mental Health Act detentions

Across the Trust in the year 2020-21 there were 2798 inpatient and community detentions not including those detained to other organisations and later transferred to Sussex Partnership.

It is important when analysing this data to bear in mind that it relates to the number of detentions under the Mental Health Act during the period 1st April 2020 to 31st March 2021, not to the number of people detained. Some patients have been subject to more than one detention throughout the year, so would be counted more than once. This is also pertinent if pulling out data relating to services where the number of inpatient detentions and Community Treatment Orders (CTOs) are very small, such as the Children's and Young People's (CHYPS) and Learning Disability (LDS) services.

It should be noted that the protected characteristics are taken from the Carenotes system and rely on ward and community staff inputting these details within Patient Demographics. As in previous years, issues remain with the inputting of protected characteristics such as sexual orientation, religion/belief and disability.

The data can be broken down as below:

• Section 5	263
• Section 2	1133
• Section 3	798
• Section 3 Renewals	149
• Section 4	1
• Part III	58
• Part III Renewals	25
• CTOs made	168
• CTOs extended	203
• CTOs revoked	58

Overall, 50.8% of inpatients detained under the MHA, or whose detention was renewed were female and 47.8% male. 0.9% of detentions (22) related to those people whose gender was undefined and 0.5% to those who identified as Transgender (12). By contrast, 33.4% of those placed on a CTO, or whose CTO was extended in 2020-21 were female and 64.2% male (this is in line with national trends) and the proportion of males whose CTO was extended rose to 67.5%. 1.6% (6 people) detained on a CTO in 2020-21 identified as Transgender.

Women were slightly more likely to be detained under section 2 (51.5%), less likely to be detained under section 3 (48.9%) and over twice as likely to be detained under section 5 holding powers than men (65.8%) in 2020-21.

The most common age group for women detained under section 2 was 71+ (20.8% of total women detained), followed by 21-30 (19%). This was also the case for

those women detained under section 3, many of whom had detentions 'regraded' from a section 2. Similarly, the highest proportion of men detained under section 2 were in the 71+ category (23.6%), followed by 21-30 (19.8%), however 31-40 was the most common age category for men detained under section 3. 50% of those people detained who identified as Transgender or 'Other' were under the age of 30; two were under 16.

The proportion of those people detained as inpatients with no Ethnic Origin specified rose again, to 17.2% from 14.3% last year. Performance around the recording of Ethnic Origin improved, as should be expected, with the longer-term detentions and only 3.2% of those detained on a CTO, or whose CTO was extended in 2019-20 had no Ethnic Origin recorded. 8% of those detained as inpatients and 15.1% of those on CTO were of Black or Minority (BAME) background. 9.7% of those detained under section 3 were of BAME background, with the highest age group being 31- 40. 13.7% of those people placed on a CTO and 16.3% whose CTO was extended were of BAME background. The average age of those of White background placed on CTO was 42 and the most common age range by far was 31-40 (21% of all CTOs made). Just 4 of the 82 recalls from CTO were of people of BAME background (4.9%). Two of these recalls relate to one person. Five of the 58 revocations in 2020-21 related to people of BME background (8.6%).

Capture of data relating to disability on Carenotes is limited to one question "Do you consider yourself to have a disability?" and 77.5% of detained inpatients and 69.3% of those on a CTO fell into the 'Prefer not to say/Undefined' category, a significant drop compared with last year.

The most common relationship status was 'Single', with 46.1% of those detained as inpatients, rising to 78.4% of those on a CTO identifying as such. We have noted in previous years that the proportion of those whose status is 'Single' tends to increase significantly with the longer-term detentions, such as section 3 and CTOs. In 2020-21, 38.9% of those detained under section 2, 50% of those detained under section 3, 73.8% of those placed on CTO and 82.3% of those whose CTO was extended were single.

Participation

Involving Service Users, Family, Friends and Carers

The People Participation Team remains committed to increasing the diversity of the people that undertake expert by experience opportunities with us. We also work closely with CDS employed Participation Leads in the trust such as in Forensic services, Children and Young People services and Learning Disability services collectively reviewing and sharing expertise related to diversity and inclusion.

Our belief is that by listening to, and acting on the voices of people who use our services, and their friends, families and carers, we will be able to deliver the services that people really need and want.

Representatives from the Participation team continue to sit on the reference groups for each of the protected characteristics, and lived experience representation is considered and included as needed to enrich work and discussions taking place.

There is now a dedicated staff network for people with lived experience of mental health needs (VaLE), which is a positive step, and this network is able to ensure we are thinking about staff with lived experience as well as those using our services.

We now have a dedicated Participation Strategy in place for 2021/2024, which covers all areas of our organisation, and includes the need to enhance the Equality, Diversity, Inclusion and Human Rights work from the lived experience perspective, and we are currently working to develop specialist resource to develop this, as well as this being a “golden thread” throughout all the participatory work we deliver in the organisation. Our central Participation Team also hold an EDI action plan around this remit. We have also developed a specific action plan aimed at increasing participation into our trust volunteer programme from diverse groups.

As an organisation, we are working together to better improve our work around People’s Experience, and the data gathered through the EDI hub will help us do this specifically for the FFT. Through our work on People’s Experience, we will be thinking about how we hear from different voices, and how we reach out to ensure we hear from those we are not currently hearing. Key to doing this is also how we connect and are involved in the work in the wider SHCP, and how we grow our relationships with local third sector and peer led organisations, particularly those connected to minority communities.

Our workforce of specialist lived experience specific roles is continuing to grow, and the development of this part of our workforce is a key element of the Participation Strategy. This work continues to have a large cultural change element.

The wider Participation Portfolio is also undertaking significant work to improve the experience of people who use our services through the EDI lens. This includes work led by our Spirituality team to improve the assessment of people’s spiritual, religious and cultural needs and how this translates in to the care and treatment they receive and creative use of the arts as a tool for engagement with different population groups.

3. A representative and supported workforce

EDS2 Status: **Achieving**

Fair and equitable employment is a core part of our values. We believe everyone counts and have a goal to be the provider, employer and partners of choice.

We collect extensive data on our workforce across the protected characteristics which can be viewed at our online Equality Performance Hub.

<http://www.sussexpartnership.nhs.uk/equality-performance-hub-equality>

Below is a summary of our key findings;

Data collected represents employee information held on the Electronic Staff Records (ESR) for the period of 31 April 2020 to 01 April 2021. It shows that the Trust employs 5266 permanent and Fixed Term contract staff (excludes Bank Workers, and secondees). Of those 5266 Staff, 3255 work full-time and 2011 people work part-time. These are made up of clinical staff and non-clinical staff. 33% of full-time workers and 15% of part time workers are male.

Disability

10% of members of staff declared a disability. This in turn helped the trust to make 413 Reasonable Adjustments (RA) to keep people in employment.

This year the Trust celebrates another two years of being a Disability Confident Committed to Level 2: Disability Confident Employer. This demonstrates that we go the extra mile to make sure disabled people get a fair chance in the workplace. With our strong commitments to working in collaboration with three staff networks, Disability, Neurodivergent and Valued Lived Experience our ambition is to gain a Disability Leader status

Workforce Disability Standard

The Workforce Disability Equality Standard (WDES) is a set of specific measures (metrics) that enables NHS organisations to compare the experiences of disabled and non-disabled staff. This information is then used by the relevant organisations to develop a local action plan, and enable them to demonstrate progress against the indicators of disability equality. Sussex Partnership has collected data since 2008 through its EPH and will have the base line data available for submission. Groundwork is being done around reasonable adjustments and adapting our workforce policies to becoming more flexible for those that have a disability through our WDES task and finish group.

- In 2020/21, 88% of the workforce has given an answer to the question, 'do you consider yourself to have a disability?'
- These answers have supported the Trust's focus on improving the experience of the disabled workforce and gaining a better understanding for the reasons for non-disclosure.
- 10% of employees have declared a disability, an underrepresentation against the population (17.2%) and the percentage of disabled people employed in the UK workforce, 46%

- 8.4% (2111) of job applicants and 6.9% (103) of successful appointments declared a disability which was level with last year's figures which had shown an increasing trend for several years.
- 18% of all formal disciplinarys or grievance were set against those that disclosed a disability during 2020/21, which was higher than previous years, however, given that the total number of disciplinarys and grievance was 57, this is too low a figure from which to draw firm conclusions.

For our 2020/21 report please visit <https://www.sussexpartnership.nhs.uk/equality-performance-hub-equality>

Age

- 36.2% of staff were over the age of 50 years old. 1436 staff were in the highest age category (27.8%) of 41- 50 years old.
- 42.6% of all applicants were aged younger than 30. Of those applications 434 people were successful at interview and gained a position at the Trust.
- 41-50-year-olds saw the highest employee relation cases (37%) during 2019/20.
- Leavers aged between 21-30 were the highest group of leavers this year (26.9%)

Ethnicity

There has been no movement in the percentage of BAME staff from 12.5% in 2020/21.

Categories are mainly broken down by the following:

White and White Other

As per the 2011 census (ONS) ethnic classification term 'White' is used in this report and refers to White, White Irish and White Other. The separation of White Irish and White Other from the BAME figures comes as part of the National Workforce Race Equality Standard calculations

Black, Asian and Minority Ethnic (BAME)

As per the 2011 census (ONS) ethnic classification, the term black and minority ethnic (BAME) is used in this report to refer to people from the following ethnic groups: Asian British, Asian Bangladeshi, Asian Pakistani, Asian Indian, Asian Other, Black British, African, Caribbean, Black Other; Chinese or Any Other Ethnic Group; Mixed White and Asian, Mixed White and Black, Any Other Group.

- You were 3.25 times more likely to be employed in 2020/21 if you are White British as opposed to BAME.
- White other accounted for 6.7% of leavers, the lowest percentage in this category since 2016/17 (5.7%). 17.5% of all leavers identified as BAME, an overrepresentation against the workforce mean of 12.5%
- BAME staff represented 13.1% of employee relations cases when compared to the Trust workforce (12.5 %), and while this is a reduction from figures between 2017-2019, it is an increase of 3.4% from 2019/20 (9.7%).

- 14.8% of BAME candidates were successful in gaining employment during 2020/21, an increase of 4.8% from last year, and above the workforce mean of 12.5%.

Workforce Race Equality Standard

In 2015 WRES was introduced to enable employees from black and minority ethnic (BAME) backgrounds to have equal access to career opportunities and receive fair treatment in the workplace.

NHS Trusts use the WRES to self-assess against the nine indicators, which are in place to promote workplace equality for BAME staff. SPFT is constantly exploring how the working environment for BAME staff could be improved by reviewing multiple techniques and ascertaining how other Trusts have achieved this.

Gender and Gender Identity

73.9% of our workforce are women and 26.1 % are men, according to ESR, which does not make provisions for those that identify as non-binary or transgender.

- 75% of Executive Board members are identified as female.
- Women represent 71.2% of all employee relations cases. Men are overrepresented in all employee relation cases: 28.8% against the workforce mean of 26%
- The majority of applicants for jobs were identified as female (76.2%).
- Reducing the gender pay gap to 50/50 by 2020 is the aim of the Gender reference group. Mitigating actions have been put in place to address the 48.8% median average bonus payment in favor of men compared to the previous year 60% in favor of men.
- To view our Gender Pay Gap Report please click the following link: https://www.sussexpartnership.nhs.uk/sites/default/files/documents/tbp09_19_inclusion_and_diversity_appendix_1_gender_pay_gap.pdf

Sexual Orientation

6.8% of staff identify as Lesbian, Gay or Bisexual (LGB); a slight increase on last year's figures and continuing an upwards trend. The proportion declared or unknown has also risen slightly from last year continuing a trend there also.

- 7% of staff that are in leadership roles of Band 8c and above identified as LGB.
- 2191 applicants (8.7%) declared themselves as lesbian, gay or bisexual, a significant increase in number from 1,275 in 2019/20 (7.7%).
- LGB staff accounted for 6.3% of formal employee relation cases; even with the workforce mean of 6.1%, and a massive drop from 13.7% last year.
- 7.7% of all leavers identified as LGB and 8.9% of individuals appointed were LGB.
- 4.6% of staff taking maternity, paternity or adoption leave during 2020/21 identify as LGB.

Spirituality

- 39.8% of staff identify as belonging to the Christian faith, and Atheists accounted for 22.7% of our workforce. 19.1% of our workforce have not disclosed a religion or belief which is below the declaration rates for patients and service users. This is reflected in recruitment figures, with most appointments from those that identify as Christian (35.2%) and Atheists (26.6%).
- There continues to be a low percentage of appointments to staff who define as Sikhism (0.1%).
- 34.7% of all leavers identified as belonging to the Christian faith. 20.4% of leavers did not disclose their faith.

Pregnancy, Maternity and Adoption

218 people took maternity, paternity or adoption leave in 20/21

- 90.4% taking maternity leave are identified as women and 9.6% as men taking paternity leave
- 4.6% identified as LGB
- 10.6% disclosed a disability
- 31 – 40-year-olds accounted for 63.3% of all leave relating to pregnancy, maternity, paternity and adoption leave.

Volunteers

The Trust currently work with 61 volunteers which is a drop of 9 from last year, but retains a significant increase of volunteers from 25 in 2018/2019. It is expected that the pandemic impacted numbers of people volunteering until lockdown restrictions eased.

- 72.1% of volunteers identify as White British
- 41-50-year-olds account for the largest age group of all volunteers at 19.7%.
- The gender split of volunteers is similar to our workforce (18% Male and 67.2% female). However, no figures were collected for those who identify as transgender or non-binary.
- 8.2% of volunteers identified as LBG
- 19.7% of volunteers have disclosed that they have a disability.
- 59% gave a valid response in disclosing a religion or belief. Of the 61 volunteers, 26.2% of volunteers identify as Christian followed by 14.8% as Atheist.

4. Inclusive Leadership

EDS2 Status: **Achieving**

Membership and Governors

The Trust achieved Foundation Trust (FT) status in April 2008. FT's have greater freedom than NHS trusts to run their affairs and are not subject to central government control. The Trust can use these freedoms to decide how best to deliver the kind of services that our patients and service users want. With these freedoms come important responsibilities, so the Trust is accountable to our local communities, through our members and governors.

In 2020 the Council of Governors approved the Membership strategy for 2020-2025. The strategy identifies 3 core objectives:

- Objective 1: To improve engagement with members
- Objective 2: To build a community that is representative of the communities we serve
- Objective 3: To effectively communicate with members

Objective 2 is underpinned by the data we hold on our members across the protected characteristics. As of the 31st March 2021 the Trust had 4,931 members.

The actions being taken by the membership team to address the data include

- Analyse our membership on a regular basis
- Develop relationships with schools to increase younger people's representation
- Increase LGBTQ+ and BAME community representation
- Increase carers, in particular young carers representation
- Increase learning disability representation

The Council of Governors is made up of 34 Governors: 21 elected and 8 appointed, and 5 elected staff governors. Elected governors are members who are voted in by the Foundation Trust members in the appropriate constituency. The Council of Governors meets quarterly in public. Their general duty is to hold the non-executive directors individually and collectively to account for the performance of the Board of Directors and to represent the interests of our members and the public.

The Board of Directors and the Council of Governors work very closely together to discuss progress, objectives and to plan our strategic development. The members of the Council reflect the diverse nature of our services, staff and the people we care for and ensure the Trust provides the high-quality services that are wanted and needed locally.

- The gender of Governors is 57% male and 43% female with 1 of those Governors identifying with a gender other than that assigned at birth
- There are currently no BAME Governors appointed, and 1 is undefined
- 5 identify as LGB and 3 are undefined
- 46% (12) of Governors belong to the Christian faith, 5 are Atheist, 1 is Buddhist and 8 others have not disclosed their faith.

Board Leadership

The Trust has actively recruited board members from a diverse background. The total number of Board members is 15. As of March 2021, the figures of BAME/female board members were:

	Breakdown of Trust board members			
	BAME (%)	BAME (Number)	Female (%)	Female (Number)
Executive	14%	1	56%	4
Non-executive	37%	3	50%	4

Learn more about the Board here:

<https://www.sussexpartnership.nhs.uk/how-our-trust-run>

Board Papers

Board papers, including for assurance, discussion or briefing require due regard to the public sector equality duty by the Trust. For proportionality, only Board papers for approval or ratification require an equality analysis.

Staff Networks

Sussex Partnership NHS Foundation Trust has a proudly diverse workforce made up of people from many different backgrounds. To amplify and hear the voice of our workforce it is vital that we support inclusive and effective channels of communication and learning. One way we do this is through the 7 staff networks. They offer a space for staff to explore common themes and values in a way that feels meaningful and safe.

Our virtual staff networks play a crucial role in exploring what is needed to support and develop our staff by offering an inclusive environment. Here lessons can be learnt to improve our working environment and organizational culture can be challenged and developed. We are keen to build on what intersectionality means at Sussex Partnership and the staff networks are key to doing this. The Trust acknowledges that we each have our own unique experiences of discrimination and that as individuals we are more than our protected characteristics. This year has seen the development of the Spirituality Staff Network and as below the Neurodivergent Staff Network.

Neurodivergent Staff Network

Sussex Partnership is one of the few NHS Trusts to have a Neurodivergent Staff Network; a forum for employees who are autistic, dyslexic, dyspraxic, have epilepsy, ADHD or any other divergent brain function. Since its launch in May 2019, the network has convened many times across various locations in the Trust, but since CoVid-19 hit has been exclusively online. Meetings have been well attended: there are now over 50 members on the mailing list from a range of staff groups: admin, nursing, psychology and more! Work so far has included:

- Writing a successful bid to acquire funding for a Staff Clinic, accelerating diagnosis of ADHD and autism for staff members
- Filming bitesize and longer training films about reasonable adjustments for staff members (currently in production with Mindwick)
- Speaking at nursing conferences and in various meetings to raise awareness and celebrate the unique contributions of neurodivergent staff members
- Continuing engagement with Education and Training to improve neurodivergent staff members experience of employment with SPFT (improving outcomes for SPFT simultaneously)

We provide a monthly online check-in which has always had 10+ participants and meet up to discuss issues relevant to being a neurodivergent member of staff with SPFT. Co-Chairs and the group as a whole provide solidarity and care for our members, as well as a safe space to be out as neurodivergent, acknowledging both vulnerabilities and strengths. We do what we can, in limited time, to create positive change for neurodivergent members of staff within the trust.

Spirituality Staff Network

The new Spirituality Network has continued to develop and grow in numbers and focus on all spiritual matters. It is for all staff who are interested in spirituality. If you are interested in joining or would like further information, please email simon.hobbs@sussexpartnership.nhs.uk for regular updates and information. A core group is being developed to take the network forward

TimeOut Staff Network (LGBTQI)

The Time Out staff network at Sussex Partnership is one of the longest running staff networks. It was set up to support LGBTQI staff and allies by providing a safe space for debate, reflection, actions and activities that support LGBTQI and the Trusts wider staff communities and provide critical function to the Trust. The network relaunched in 2021 with a new steering committee and membership survey. The results from this directed a new strategy and 'voice of welcome' marketing approach which reframed the network as a place of belonging. The networks key objectives for the year are visibility, growth, engagement, training, collaboration and of course to have fun.

This work, along with a formal 'symbols of support' membership and allies' promotion has grown membership by 18% to 140 formal members. The network has revamped meeting structures, started a book club and is working with other internal and external networks on post COVID 19 projects. Additionally, over the last 18 month the network has produced and distributed over 1500 rainbow lanyards across the Trust with its email signature pronoun campaign, and has been working with the Trust LGBT training lead in marketing inclusion training.

Disability Staff Network

The Disability Staff Network recently relaunched in 2021, co-chaired by Catherine Gallop and Fleur Goff-Beardsley. We are currently holding focus groups with our Network members to determine the priorities of the Network. We have a mailing list of approximately 300 and our first workshop Introducing British Sign Language had over 60 attendees.

The Disability Staff Network aligns itself to the core values of the Trust:

- People first: We welcome anyone with an interest in disability.
- Future focused: We have recently reformed, and have some exciting plans. We'd love to hear your ideas.
- Embracing change: We want to keep up to date with the latest news, advice and assistance available.
- Working together: We wouldn't be a network without you! But it's not all about work; we want to organised meet-ups, socials and spaces where we can come together and share experiences and friendships.
- Everyone counts: We value, appreciate and respect each other.

Conclusion

We understand that promoting equality is closely related to quality. A quality service is one that recognises the needs and circumstances of each patient, carer and staff member and ensures that services are accessible, appropriate, safe and effective.

A service cannot be described as a quality service if only some of the patients are receiving positive outcomes.

One of Sussex Partnership NHS Foundation Trust's visions is to be the provider, employer and partner of choice. By embedding the principles of equality, diversity and human rights at the center of everything we do, we are giving ourselves the best chance of achieving this goal.

For more information

Visit: <http://www.sussexpartnership.nhs.uk/equality-performance-hub-equality>

Email: Equality.Diversity@sussexpartnership.nhs.uk