



## Diversity & Inclusion Action Plan 2016/17 – agreed by Board 7 June 2016

	Actions to address	Link to EDS2/WRES*	Lead	Comments
•	Obtain site audits from Property Services/undertake as appropriate to determine accessibility priorities	1.2	Estates	
•	Develop pathways to improve transition between acute and community services	1.3	Clinical lead managers (Helen/Fiona)	
•	Capture patient E&D data at appointment and in survey/focus groups to enable better analysis.	1.2 2.4	Locality Managers (adults) TBC (C&F) Community & Patient Involvement co-ordinator	
•	Develop a patient reference group to develop patient leadership	1.2	Community & Patient Involvement co-ordinator	
•	Capture E&D data for complaints received throughout 2016/17 to enable full analysis to be undertaken	2.4	Customer liaison, complaints and claims officer	
•	Undertake an Equal Pay Audit and publish findings to Exec/Board	3.2	HR	
•	Undertake workforce diversity analysis and publish results to Senior Leadership Team/Exec/Board	4.1	HR	June: In Progress
•	Paper presented to Exec/Board to ensure section included on diversity & inclusion	4.2	Exec	June: Completed – template updated
•	Record E&D data for recruitment appointments and include in workforce analysis for y/e 16/17	WRES section 5	HR	
•	Record E&D data for non-mandatory training and include in workforce analysis for y/e 16/17	WRES section 5	HR/L&D	
•	Undertake a data cleanse of information held for co- owners and encourage completion of ethnicity data	WRES	HR	

## **EDS2** Reporting requirements

Goal	Number	Outcome	2015/16 ASSESSMENT
Better health outcomes	1.1	Services provided by CSH are designed and delivered to meet the health needs of local communities	Achieving
	1.2	Individual people's health needs are assessed and met in appropriate and effective ways	Achieving
	1.3	Transitions from one service to another, for people on care pathways, are made smoothly with everyone well-informed	Developing
	1.4	When people use CSH services, their safety is prioritised and they are free from mistakes, mistreatment and abuse	Achieving
	1.5	Screening, vaccination and other health promotion services reach and benefit all local communities	Excelling
Improved patient access &	2.1	People, carers and communities can readily access community health services and should not be denied access on unreasonable grounds	Achieving
experience	2.2	People are informed and supported to be as involved as they wish to be in decisions about their care	Achieving
	2.3	People report positive experiences of CSH services	Developing
	2.4	People's complaints about services are handled respectfully and efficiently	
A representative	3.1	Fair recruitment and selection processes lead to a more representative workforce at all levels	Achieving
and supported	3.2	CSH is committed to equal pay for work of equal value	Achieving
workforce	3.3	Training and development opportunities are taken up and positively evaluated by all co owners	Achieving
	3.4	When at work, co-owners are free from abuse, harassment, bullying and violence from any source	Achieving
	3.5	Flexible working options are available to all co owners consistent with the needs of the service and the way people lead their lives	Excelling
	3.6	Co-owners report positive experiences of their membership of the workforce	Achieving
Inclusive leadership	4.1	Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations	Developing
·	4.2	Papers that come before the Board and other major Committees identify equality-related impacts including risks, and say how these risks are to be managed	Developing
	4.3	Middle managers and other line managers support their staff to work in culturally competent ways within a work environment free from discrimination	Achieving