

South East Coast Ambulance Service NHS Foundation Trust Inclusion Working Group

Notes of a meeting held on Wednesday 12th October 2015, Coxheath Boardroom

Present

Adrian Hogan	(AH)	Infection Control Lead (deputising for NB)
Andrew Hanney	(AHa)	Head of Estates
Angela Rayner	(AR)	Inclusion Manager
Ariel Mammana	(AM)	Staff -side representative
Colin Taylor	(CT)	Head of Risk Management (Interim)
Francesca Okosi	(BC)	Director of Workforce Transformation (Chair)
Isobel Allen	(IA)	Membership and Governor Engagement Manager
Janine Compton	(JC)	Head of Communications
Jim Reece	(JR)	Patient/Public Representative
John Rivers	(JRi)	Patient/Public Representative
Karen Mann	(KM)	IT Development Project Manager
Louise Hutchinson	(LH)	Complaints and Experience Manager
Ray Savage	(RS)	Patient Transport Service Business Manger
Richard Ward	(RW)	Learning and Development Lead (deputy HE)
Robert Ivey	(RI)	HR Business Partner
Rob Parsons	(RP)	Learning and Development Lead - Risk Management
Steve Bradley	(SB)	CQC and Non Clinical Governance Lead
Steve Rose	(SR)	Allied Clinical Services/Standards Manager

Apologies

Clare Mitchell	(CM)	Company Secretary (deputised by IA)
Helen Edmunds	(HE)	Senior Learning and Development Manager (deputised by RW)
John Griffiths	(JG)	Head of Operational Support
Nicola Brooks	(NB)	Head of Clinical Governance and Standards (Deputised by AH)
Paul Everest	(PE)	Staff Side Representative
Paul Ranson	(NB)	Head of Procurement

Secretariat:

Asmina Islam Chowdhury	(AIC)	Inclusion Coordinator
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Guests:

Isaac Jordan	(IJ)	Paramedic, Hove
Marcia Daigo	(MD)	Associate Director for Organisational Development Interim
Trevor Freeman	(TF)	Staff-side Representative

1. Welcome and Apologies

1.1 AR welcomed everyone to the meeting and explained that the Chair would be arriving imminently. Round table introductions were made and apologies

1.2 recorded as above.

2. Review of notes of the meeting held 22nd July 2015

2.1 The notes of the meeting held on 22nd July 2015 were reviewed and **agreed** as an accurate record with two corrections to be made;

2.1.1 IA to be moved from the list of attendees to the list of apologies.

2.1.2 Dates in item 2 to be amended, to reflect correct meeting date of 24th April 2015.

Matters Arising

2.2 There were no further matters arising

Action Log

2.3 56. 1.1 (24/04/2015) Cultural Competency Training – It was agreed that the action needed to be reassigned to HE and that RP should provide an update on progress.

Action: Action 56.1 to be reassigned to HE and RP to provide HE with update on progress.

Date: October 2015

2.4 61.1 (30/01/2015) Membership Review – AR and IA had met as a subgroup to review IWG membership – this item will be addressed on the agenda.

2.5 62 (22/07/2015) Update of Trust picture library – AR thanked JC for agreeing to resource a photographer and that advised that a number of BME staff members had been identified. The names of those giving permission will be passed to the Communications team so that arrangements can be made to update BME images. TF advised that one of the existing BME images online depicted a BME staff member with epaulettes not consistent with their role. JC agreed that this would be investigated and the picture removed and replaced with the staff member in correct epaulettes.

Action: JC to remove and replace image with updated version showing correct epaulettes.

Action: AR to share the names of staff members who had consented to be photographed with Comms team

Date: October 2015

2.6 63.3 (22/07/2015) Equality Objective Review – Item to be addressed on agenda.

2.7 63 4 (22/07/2015) Equality Objective Review – AR updated that following the departure of Ian Slater, the original meeting had been cancelled and a new meeting arranged with MD and PF

2.8 64.6 (22/07/2015) WRES Subgroup and progress – FO provided an update that she had discussed diversity of university students at the HRD and was now the national lead for this work stream. FO will be taking forward with Sue Noyes, Chief Executive for East Midlands Ambulance Service and Chair of the National Ambulance Diversity Forum (NADF).

2.9 65.1 (22/07/2015) ePCR and diversity monitoring – Meeting is scheduled for 3rd November 2015.

2.10 65.2 (22/07/2015) ePCR and diversity monitoring – FO advised that the need for a communication strategy had been discussed with Paul Sutton and that a meeting with JC would be arranged to progress.

2.11 65.3 (22/07/2015) ePCR and diversity monitoring – AR advised that this would be picked up in the meeting with MD and PF.

2.12 It was **agreed** to close the following actions, which had been completed:

49.1 (30/01/2015) – EDS2 Action Plan 2014

49.2 (30/01/2015) – EDS2 Action Plan 2014

54.2 (24/04/2015) – Obesity – EU ruling

60.1 (24/04/2015) – IHAG Partnership working

60.2 (24/04/2015) – IHAG Partnership working

63.1 (22/07/2015) – Equality Objectives 2015

63.2 (22/07/2015) – Equality Objectives 2015

64.1 (22/07/2015) – WRES subgroup and progress

64.2 (22/07/2015) – WRES subgroup and progress

64.3 (22/07/2015) – WRES subgroup and progress

64.4 (22/07/2015) – WRES subgroup and progress

64.5 (22/07/2015) – WRES subgroup and progress

66 (22/07/2015) – Reasonable adjustments

3. Review of IWG activities since last meeting

3.1 Activities recorded were as follows: IHAG subgroup, planning meeting for E&D training needs workshop; Working Better for Patients (NHS Confed conference), Maidstone Mela; the re-launch of National Ambulance LGBT Partnership, Brighton Pride; WRES action plan subgroup, Diversity Champions 1st network meeting.

3.2 SR advised that he had made a contact at Crawley Borough Council, who was involved in dementia training and awareness and he would be progressing the link to scope out opportunities for collaborative working.

3.3 JC advised that there had been an Inclusion and Involvement stand at the Annual Members Meeting this year, which had been covered by two of our IHAG members and AR.

4. Equality Objectives 2015 and progress on action plans

4.1 All leads had been asked to provide an update on progress prior to the meeting;

4.1.1 Action 1.1 Lead: Nicola Brooks – Clinical - Develop steps to ensure the health needs of our population are considered in the development of clinical pathways.

Update showed that actions for Q1 and Q2 were complete with Q3 in progress. FO commented that progress was looking positive for completion by 31st March 2016.

- 4.1.2 Action 2.1 Lead: Louise Hutchinson – Patient Experience - Understand impact on disabled patients and carers of not being able to convey assistance equipment.

Update from LH showed that Q2 progress was currently incomplete and this had been delayed as initially had planned to liaise with Sussex hospital and details had been obtained for key personnel in Sussex to progress this area of work. However, decision was taken to focus on Surrey hospitals due to current PTS contracting climate. It was noted that there was a need to consider this action in relation to both PTS and A&E crews in the delivery of this objective.

- 4.1.3 Action 3.1 Lead: David Vincent – Recruitment - Develop steps to improve the percentage of BME staff in the workforce.

A number of actions had been provided by DV, however the action plan does not outline how the recruitment strategy would be updated to ensure more diverse recruitment methods are embedded.

Action: DV to update the SMART action plans with update of recruitment strategy included

Date: October/November 2015

- 4.1.4 Action 3.2 Lead: Robert Ivey – HR Review current Bullying and Harassment and Whistleblowing policies and procedures to ensure they are relevant to the outcome of the staff survey and informed by national guidance and best practice. Ensure new policies and procedures are communicated to staff.

It was agreed that RI would be the sole lead going forward as the HR Business Partner. Update provided showed that actions for Q1 and Q2 were complete, and Q3 in progress with the policies due to go to WDC for sign off. RI advised that B&H policy was still in progress and it would not be possible to sign off at present. Concerns were raised and discussed in relation to the objective being achieved by year end.

Discussion took place on the need for a staff internal communication plan/campaign for both policies. It was agreed that RI would liaise with Liz Spiers to develop and feedback to the IWG.

Action: RI to liaise with Liz Spiers to develop internal communications plan/campaign for both Whistleblowing, and Bullying and Harassment policies.

Date: October/November 2015

- 4.1.5 Action 4.1 Lead: Pam Fricker – OD Achievement against E&D competency for all staff in personal development and appraisal reviews including executive and non-executive board members.

AR updated that due to change in management within OD, it had not been possible to progress this action thus far. However, AR suggested that the action lead for this should be changed to Katy Larkin, OD/Training Lead or MD. AR to confirm with MD.

- 4.1.6 Action 4.2 Lead: Pam Fricker – OD Cultural competency training needs analysis to be undertaken in collaboration with the IHAG in light of Experts by Experience training.

Action plan showed progress as complete for Q2 and in progress for Q3. It was agreed that there was a need to review action leads in light of the new senior

management structure and these should now be assigned to the Head of Clinical Education and the Associate Director of OD.

Action 4.3 Lead: Pam Fricker – OD Design and implementation of a cultural competency training programme tailored to staff role.

Progress reported as complete for Q2 and in progress for Q3. It was agreed that there was a need to review action leads in light of new structure and these would now be assigned to the Head of Clinical Education and Associate Director of OD. AR to discuss next steps in meeting with PF and MD.

Action: AR to meet with MD to ascertain appropriate lead for action 4.1.

Action: AR to discuss the progress of actions in Objective 4 with leads to ensure delivery by March 2016.

Date: October 2015

4.2 A copy of the Equality Objectives relating to the above actions can be found below.



Proposed Equality
Objective 2015 - 27-C

5. Workforce Race Equality Standard (WRES)

5.1 AR updated the group that a subgroup had met on 15th September to develop a draft WRES action plan. Subgroup members had included; AR; David Vincent; RI; RP; HE; Ray Mazhindu; AM; TF and AIC.

5.2 The proposed action plan was discussed and following feedback it was approved with the following amendments.

5.2.1 Action 3: Amend lead to HR Operations Manager

5.2.2 Actions 4, 9, 10, 12, 14, 18 and 20 all specify Head of Leadership and Talent Development as the action lead. AR to confirm with MD and update plan as required.

5.2.3 Actions 5, 6, 8, 17 and 23: Amend Workforce Analyst to Workforce Analytics Manager

5.3 AR noted that it was likely that all actions would not be completed by year end. However, action plans to support progress on the WRES would become part of a yearly review cycle.

Action: AR to confirm leads for action plan to be confirmed where still required, with MD and action plan to be updated with agreed amendments.

Date: October/November 2015

Action: Updated action plan to be circulated and implemented, with progress reports to be brought to IWG.

Date: November 2015

6. Overview of MIND Blue Light time to change programme

6.1 The group received a presentation from Isaac Jordan (IJ), Paramedic, who had taken the initiative to become a MIND Blue Light Champion after witnessing how stress and culture, in conjunction with the nature of the job affected the mental health of colleagues. This is also reflected in the 2014 staff survey results where SECAMB's results for stress were reported as higher than the national average. IJ spoke of how the work he had begun at Hove in relation to the MIND programme had already led to a culture change where staff are more comfortable in raising issues on an individual basis. He felt group culture would take longer to address. A copy of the presentation can be found below.



bluelighttimetochang
e[1].ppt

6.2 IJ confirmed he was the only champion in SECAMB at present and had attended training sessions with MIND, where networking opportunities had allowed him to make links with champions across other ambulance trusts. He noted that in comparison, SECAMB was behind in progressing this area of work. IJ requested the Trust could make a pledge to support this initiative and circulated a variety of literature produced by MIND.

6.3 IJ took questions on the programme and discussed the availability of training. He spoke about staff perception and how colleagues feel that their wellbeing is not of importance to SECAMB with many feeling that the human touch had been lost as demand on the service grew. FO advised that support for staff is available, but it is fragmented and needs to be more cohesive along with improved support from our occupational health provider, manager training and communications. FO thanked IJ for his presentation and advised the group that a Workforce Wellbeing Strategy was one of her objectives for this year and this programme would support delivery of key performance indicators. FO invited IJ to be a part of the working group on this area of work alongside MD. Members provided extremely positive feedback for the programme, and IA invited IJ to present at the Foundation Council, so that further awareness of the programme across all staff groups could be achieved. AR advised the group that IJ would be presenting at the Diversity Champions meeting on 23rd November, alongside Andrew Pattison, who would be speaking about the TRIM programme. She noted that mental health was identified as a priority.

Action: FO to invite IJ to join the Workforce Wellbeing Working Group and IA to invite IJ to speak at FC.

Date: November 2015

7. Diversity Champions

7.1 AR informed the group that the Diversity Champions had attended their inaugural meeting on 9th September, where the morning's speakers had been PC Kim White OBE, who provided cultural competency training in relation to the Gypsy and Traveller communities, followed by a patient representative, Peter De Schulthess, who spoke about his experience of treatment following a mental health crisis. AR advised that at the next meeting in November would be focussing on mental health.

7.2 AR noted that many members find it extremely challenging getting time to attend meetings and felt this might be something that could be considered when developing the Staff Wellbeing Strategy.

8. Inclusion Hub Advisory Group (IHAG)

8.1 JRi provided an update to the group on the IHAG meeting which had been held on 28th September. Agenda items included an overview of PTS services and current contract status, Rapid Tranquilization for life Threatening Behavioural Disorders (RT4LTBD) procedure, CQUIN programme for this year and an update on the transformation programme. The full IHAG agenda is as below;



01 IHAG Agenda
28th September 2015

8.2 AR also discussed issues that had arisen following the invitation of IHAG members to a recent SRV engagement day. IHAG members felt they had been used as a part of a tick-box exercise and were extremely disappointed at the lack of involvement prior to the event. AR reported that this had since been followed up with Fleet and that lessons had been learnt.

9. Foundation Council (FC) Update

9.1 IA updated that the FC was scheduled to meet on 15th October and the agenda included the following; Update from Geraint Davies on the Trust; JC would be presenting on the results of staff friends and family test and its outcomes; Overview of the Trust's governance procedures; Team briefing folders and the Trust Cost Improvement Programme. IA also advised that there would be an update on the staff governor elections with two vacancies coming up; one for an operational and the other for a non-operational governor. Justin Wand would also be attending to update the group on fleet innovations and FO would be providing an update on the transformation programme

9.2 IA acknowledged that the structure of the FC will be reviewed in light of the transformation programme and review of the Inclusion Strategy.

10. Review of IWG Terms of Reference (TOR)

10.1 The amended TOR's had been circulated for comment following the last meeting. Following incorporation of comments and suggestions, the updated draft was agreed at the IWG with one amendment in section 3.1 which reflected the previous governance structure. Amended TOR's to be submitted to the Workforce Development Committee for approval in January 2016.

10.2 AR tabled the revised membership proposal for the IWG which resulted in the following amendments/clarifications:

10.2.1 It was agreed that the Head of Business Transformation did not need to be a member of the group.

10.2.2 AR and MD to confirm whether AD of OD should be a member of the group, or if it should be the Senior OD Advisor.

10.2.3 It was agreed that Head of Education should be a member of the group upon appointment.

10.2.4 It was agreed that within the Operations Directorate, Fields Operations and PTS should be represented by separate Regional Operations Managers.

10.2.5 It was agreed that the Company Secretary's membership should be changed to Assistant Company Secretary.

10.2.6 It was agreed that within Commissioning, there was a need for both the Heads of Regulatory and Statutory Compliance to be members of the group.

10.2.7 It was agreed that representation from the finance directorate would be sought on a need by need basis.

10.2.8 .It was agreed that Urgent Care representation would be provided by the Senior Operations Manager for 111.

Action: AR and MD to confirm OD representation on IWG.

Date: October/November 2015

10.3 All other membership suggestions were approved and the amended list will be included in the TOR's which will go to WDC for approval in January.

11. Open session, horizon scanning and future agenda items

11.1 AR advised the group that we would shortly be contacting those with responsibility for providing data and analysis required for the annual reporting of equality data and information. Data is required to be collected up to 31st October and will need to be submitted for uploading to the website by mid-November.

11.2 Following the full review of this year's Equality Delivery System (EDS2) and equality objectives, it is anticipated that a light touch review would suffice. An IHAG sub group will be meeting in mid-November to make recommendations on how this might be achieved.

11.3 Quality Account – both IHAG and Council of Governors have been advised of the date. However, they are still awaiting invitations. JC took an action to chase with Andy Collen and Kirsty Booth.

Action: JC to speak with Andy Collen and Kirsty Booth to ensure arrangements are in order.

Date: October 2015

11.4 There will be a joint meeting of IHAG members and Governors on 8th December. This will be the third such meeting, which provides us with the opportunity to plan an agenda of mutual interest and thank our volunteers for their work throughout the year. This year the agenda will focus on what we hope will be a light touch review of our Inclusion Strategy. FO will be speaking to the group to provide context around the internal considerations and Sarah Geater, NHS England, would be providing the external context.

12. Any other business

12.1 No AOB items were raised at the meeting.

13. Effectiveness of the meeting

13.1 Group reflected that it had been a good meeting, with IJ's presentation being a highlight. It was agreed the staff magazine would do a spotlight article on him, which may also encourage others who have taken on projects for the benefit of staff, patients and the Trust on their own initiatives to come forward.

Action: Future Spotlight article to feature IJ and his work in staff magazine. JC to liaise with Liz Spiers.

Date: October 2015

14. Date of Next Meeting

14.1 The next meeting will be held on **19th January 2016** in the **Boardroom, Sussex Regional Office**.