

SOUTH EAST COAST AMBULANCE SERVICE NHS FOUNDATION TRUST

Inclusion Working Group

Terms of Reference

1. Constitution

- 1.1. The Board hereby resolves to establish a Working Group of the Human Resources (HR) Group to be known as the Inclusion Working Group, referred to in this document as 'The Group'.

2. Purpose

- 2.1. The purpose of the Group is to decide and report to the HR Group about the Inclusion Agenda for staff and patient issues. It will provide support, advice, assurance and governance to demonstrate that the organisation is committed to:
 - Meeting its duties and responsibilities under the Equality Act 2010, Equality, Diversity & Human rights legislation and codes of practice including NHS, Department of Health and Equality and Human Rights Commission standards.
 - To promote, recognise and value the diverse nature of our communities, stakeholders and staff and in doing so, eliminate discrimination and make best efforts to provide equality of access to ensure the Trust meets the needs of patients and its staff.

3. Membership

- 3.1. The Group shall not have less than 10 members, appointed by the Board from amongst the senior managers of the Trust. One of the members will be appointed Chair of the Group by the HR Group.
- 3.2. The membership comprises of:
 - Director of Human Resources and Organisation Development Directorate (Chair)
 - Head of Inclusion & Wellbeing (Deputy Chair)
 - Assistant Company Secretary
 - Consultant Paramedic (Clinical Lead)
 - Designated Representative from Communications Team
 - Designated Representative from Finance Directorate.
 - Designated Representative from Strategy Directorate
 - Head of Compliance
 - Head of HR BP's and Employee Relations
 - Head of Learning and OD
 - Operating Unit Manager – 111
 - Operating Unit Manager – EOC
 - Operating Unit Manager – Operations

- Patient / Public representative x 2 (appointed from Inclusion Hub Advisory Group)
- Resourcing Manager
- Senior Education Manager
- Staff Equality Network representatives
- Staff side representative
- Freedom to Speak Up Guardian

4. Quorum

- 4.1. The quorum necessary for formal transaction of business by the Group shall be five members, inclusive of the Chair or Deputy Chair, and the Head of Inclusion and Wellbeing.

5. Attendance

- 5.1. Other organisational managers and officers, internal and external may be invited to attend meetings for specific agenda items or when issues relevant to their area of responsibility are to be discussed.
- 5.2. The Inclusion Coordinator will provide secretarial duties to the Group and shall attend to take minutes of the meeting and provide appropriate support to the Chair and Group members. The Inclusion & Wellbeing Manager may make appropriate alternative arrangements if required.
- 5.3. Members and officers unable to attend a meeting are required to send a fully briefed deputy who can accept actions and with whom they will liaise before and after the meeting. In exceptional circumstances where this is not possible, the member shall provide a written update to the secretariat at least two working days beforehand. Members and officers are required to attend 75% of these Group meetings.
- 5.4. The Chair of the Group will follow up any issues related to the unexplained non attendance of members. Should non-attendance jeopardise the functioning of the Group the Chair will discuss the matter with the member's senior manager and if necessary seek a substitute or replacement.

6. Risk Management

- 6.1. The IWG Chair is responsible for ensuring risk management is a standing agenda item at each meeting.
- 6.2. The IWG Secretariat is responsible for ensuring the most recent Group risk register is downloaded from Datix and included in the collation and distribution of papers to members.
- 6.3. If a Principle Risk Lead (a Principle Risk Lead has authority to progress the risk actions) is not a member of the IWG, they will be formally invited to attend by the Chair. If the Principle Risk Lead is unable to attend the

Chair will formally request an update to ensure members remain informed.

- 6.4. At all scheduled IWG meetings, members will discuss and report on each of the following criteria pertaining to each identified Open risk.
- **Progress of action(s)**
 - **Adequacy of controls (controls assurance) when identified**
 - **Risk grading reviewed**
 - **Reasons for Principle Risk Lead failing to meet a review date**
 - **Status review (Open or Proposed for Closure)**
- 6.5. The Chair will communicate with the Accountable Executive if the status of a risk changes from Open to Proposed for Closure.
- 6.6. It is the responsibility of the Accountable Executive to update the Executive Risk & Assurance Group and it is for members to approve closure of a risk or ask the Accountable Executive to ask the Chair for further evidence of assurance. Where further evidence of assurance is requested, the Chair will ensure the Principle Risk Lead changes the status of the risk back to Open (the Principle Risk Lead is responsible for all updates on their risk).
- 6.7. Members will compose an annual report and risk management will also be included.
- 6.8. The IWG will have scheduled audits and the Chair will be asked for evidence, for example but not limited to:
- Agendas, minutes and action logs
 - Risk Review Data - the data below must be collected at each scheduled meeting.
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(example only)

Datix Ref.	Progress of each action N (Not due) O (Overdue)	Adequacy of Controls: E (Effective) N (Non-Effective)	Risk Grade(s) Reviewed Y (Yes) N (No)	Review Date Met Y (Yes) N (No)	Status Review O (Open) P (Proposed for Closure)
123	N	E	Y	N	O
	O				
456	N	E	Y	Y	P
	N				
	N				

7. Frequency

- 7.1. Meetings of the Group will be held four times a year and where possible in advance of the next HR Group meeting to ensure timely reporting. Meeting dates will be diarised on a yearly basis and extraordinary meetings may be called between regular meetings to discuss and resolve any critical issues arising.

8. Authority

- 8.1. The Group has no executive powers.
- 8.2. The Group is authorised by the Board to investigate any action within its Terms of Reference. It is authorised to seek any information it requires from any employee and all employees are directed to cooperate with any request made by the Group.

9. Duties

- 9.1. The subject matter for meetings will be wide-ranging and varied but in particular it will cover the following:
 - 9.1.1. Provide a forum to support the development and implementation of an inclusion framework that meets the requirements of the NHS and Department of Health standards, national and local initiatives and targets, UK and EU legislation.
 - 9.1.2. Engender a culture of partnership working within the organisation, with other NHS organisations and outside agencies and to enable each to share good practice and reduce unnecessary duplication in its inclusion activities.
 - 8.1.3. Promote, recognise and value the diverse nature of communities, individuals and staff groups, ensuring equality of opportunity for all.
 - 8.1.4. Identify and engage with stakeholders and local and voluntary and community groups as appropriate to ensure the group are aware of the diversity issues in relation to employment and service delivery within the region.
 - 8.1.5. Provide support and guidance to Senior Managers to deliver their responsibilities to embed equality and diversity in their work and areas of management responsibility.
 - 8.1.6. Recommend and contribute to a Trust wide approach to the delivery of the Equality Delivery System 2 (EDS2) and action plans.
 - 8.1.7. Regularly monitor Trust performance against the EDS2 action plans and ensure the trust progresses towards its aim of effortless inclusion and to advise the Executive Management Team and Board accordingly.
 - 8.1.8. Recommend and contribute to a Trust wide approach to the delivery of the Workforce Race Equality System (WRES).
 - 8.1.9. Regularly monitor Trust performance against the WRES action plans and ensure the trust progresses towards its aim of diverse workforce.

- 8.1.8. Review and recommend policies and strategies related to the Inclusion Agenda, for Executive Team or for Board approval as appropriate.
- 8.1.9. Ensure mechanisms are in place to support and guide staff to undertake effective equality analysis, develop action plans and record evidence appropriately.
- 8.1.10. Identify and prioritise key issues which affect the Trust in relation to equalities or inequalities
- 8.1.11. Members and their deputies should act as a resource to staff and managers, developing their skills, knowledge and awareness, and act as role models across all staff groups.

9. Chair's Action

9.1. Where a matter falling within the authority of the Group requires an urgent decision, the Chair as an Executive Director of the Trust can take action on behalf of the Group.

9.2. All decisions made under such Chair's Action must be submitted to the next scheduled meeting for ratification and formal minuting.

10. Reporting

10.1. The Group shall be directly accountable to the HR Group. The Chair of the Group shall report a summary of the proceedings of each meeting HR Group at the next meeting of the and draw to the attention of the Committee any significant HR Group issues that require disclosure. Any significant patient related issues will also be reported to the Quality & Patient Safety Group

11. Support

11.1. The Group shall be supported by the Inclusion & Wellbeing Manager and duties shall include:

- 11.1.1. Agreement of the meeting agendas with the Chair of the Group;
- 11.1.2. Providing timely notice of meetings and forwarding details including the agenda and supporting papers to members and attendees in advance of the meetings;
- 11.1.3. Enforcing a disciplined timeframe for agenda items and papers, as below:
 - i. At least twelve working days prior to each meeting, agenda items will be due from Group members;
 - ii. At least seven working days before each meeting, papers will be due from Group members;
 - iii. At least five working days prior to each meeting, papers will be issued to all Group members and any invited directors, managers and officers.

- 11.1.4. Recording formal minutes of meetings and keeping a record of matters arising and issues to be carried forward, circulating approved draft minutes within ten working days from the date of the last meeting;
- 11.1.5. Advising the Chair and the Group about fulfilment of the Group's Terms of Reference and related governance matters.

12. Review

12.1. The Group will undertake a self-assessment at the end of each meeting to review its effectiveness in discharging its responsibilities as set out in these Terms of Reference.

12.2. The Group will agree an Annual Agenda Framework to ensure it complies with the duties defined in this Terms of Reference.

12.3. The Group shall review its own performance and Terms of Reference bi-annually to ensure it is operating at maximum effectiveness. Any proposed changes shall be submitted to the HR Group for approval.

12.4. These Terms of Reference shall be approved by the HR Group and formally reviewed at intervals not exceeding three years.

Review Date: October 2020