

South East Coast Ambulance Service NHS Foundation Trust

Inclusion Working Group

Notes of a meeting held on Wednesday 27 March 2013
in the Boardroom at Coxheath

Present:

Angela Rayner	(AR)	Inclusion Manager
Jim Reece	(JR)	Public and Patient/Carer Involvement Representative
Mo Reece	(MR)	Public and Patient Involvement Representative
Linda Wood	(LW)	Service Developments Programme Manager
Robert Ivey	(RI)	Interim HR Business Partner

Attended (by telephone):

Isobel Allen	(IA)	Membership and Governor Engagement Manager
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Apologies

Geraint Davies	(GD)	Chair – Director of Commercial Services
Andy Cashman	(AC)	Head of Contingency Planning
Anouska Adamson-Parks	(AA)	111 Programme Director
Bill Chilcott	(BC)	Head of Compliance
Blessing Enakimio	(BE)	L&D Lead (Virtual Learning)
Chris Stamp	(CS)	Senior Operations Manager
Clare Mitchell	(CM)	Company Secretary
Darren Reynolds	(DR)	Head of Volunteer Services
Fiona O’Neill	(FON)	HR Business Partner
Greg Timmins	(GT)	Head of Operational Finance
James Pavey	(JP)	Senior Operations Manager
Janine Compton	(JC)	Senior Communications Manager
Jo Byers	(JB)	Operational Business Development Lead
John Griffiths	(JG)	Head of Operational Support
Liz Langridge	(LL)	Head of HR Service Delivery (represented by R Ivey)
Mike Collins	(MC)	Head of IT
Pam Fricker	(PF)	Head of L&D
Paul Ranson	(PR)	Head of Procurement
Peter Radoux	(PRd)	Senior Operations Manager
Rob Mason	(RM)	Head of Operational Planning
Robert Bell	(RB)	Head of Commercial Services
Steve Rose	(SR)	Senior Operations Manager
Sue Skelton	(SS)	Head of EOCs

1. Welcome and Apologies

1.1 GD was unable to attend the meeting and therefore held a pre-meeting with AR to talk through the agenda and to give clear direction to support certain agenda items. GD thanks LW who agreed to chair the meeting on his behalf.

1.2 LW welcomed everyone to the meeting and thanked them for attending.

1.3 Apologies were as listed above.

1.4 The level of attendance at the meeting was noted and it was agreed that an item would be raised under Any Other Business to discuss attendance in relation to the Group's Terms of Reference.

2. Review of notes of the meeting held 30 January 2013

2.1 The notes of the meeting held on 30 January 2013 were agreed as an accurate record subject to the following amendment:

Page 4, paragraph 7.2 – it was agreed that the word 'would' will be removed (grammatical error).

Action:	Anita Smith (AS) to remove word 'would' from paragraph 7.2 on page 4, prior to the publication of the minutes.
Date:	w/c 2 April 2013

Matters Arising

2.2 2.1 – Action completed. AR advised that paragraph 5.3 on page 4 had been reworded.

2.3 2.3 – AR reported that further clarification was required from L&D to assure compliance can be demonstrated. Discussion identified a need to ensure that the trainers in L&D are equipped with the right skills and level of understanding so they can be applied to any circumstances which may arise, including Transgender training. It was clarified that responsibility for Transgender training rests with L&D.

2.4 3.1 - Action closed. AR reported this action had been superseded by the provision of a draft Transgender Policy.

2.5 4.4 - Action completed. A statement outlining the reasons for changing the Equality Monitoring Form was published in the Weekly Bulletin, following consultation.

2.6 5.2 – Members of IHAG have expressed interest in providing their views on re-developing the Patients Experience Report. Since the action was recorded focus has turned to the Francis Report and AR reported that JC is following up the action and will ensure IHAG members are involved.

2.7 7.2 – RI reported that FON has commenced work on a policy that includes equal opportunities and dignity at work. AR advised that FON will be invited to use IHAG to undertake the Equality Analysis (EA) when the final draft has been completed.

Action:	FON to provide a verbal update or short report on progress made in the development of the equal opportunities policy.
Date:	Next meeting

2.8 8.2 – Action completed. IHAG have asked to review published equality information and make recommendations for improvement. AR will take this request forward.

2.9 8.5 – Action completed. Two dates have been identified for EA training: 8 and 10 May 2013. These dates were chosen as there is less likelihood they will be impacted by a REAP 4 response status. As soon as they venues are confirmed the events will be publicised.

2.10 8.7 - GD was tasked with sending an email regarding EA training for policy writers and to advise the Exec why this was being done. This action is to be taken when the training arrangements are in place. IWG discussed this further and agreed that anyone who is introducing any type of change within the Trust should be provided with EA training, supporting item 8.8 of the previous meeting. The notification of training should include targeted messages, detailing who is expected to attend and the benefits the training will provide in terms of compliance. AR, LW, IA, and JC will form a sub-group to progress this action. AR suggested that team meetings could be utilised as an additional means of EA training if requested.

Action:	Sub-group to review and sign off on EA training notification in readiness for circulation.
Date:	w/c 2 April 2013

2.11 11 – AR advised that gypsy and traveller champions would like to be known as the Gypsy and Traveller Community Team. AR provided an update on the Team's February meeting and commented on their enthusiasm. It was reported that members of the Team have arranged shadowing opportunities for Trust staff to accompany Community Development Workers from Friends, Families and Travellers. Also reported was the availability of more training and the placement of a group subscription for the Gypsy and Traveller Times, which is published quarterly. A further update will be provided at the next meeting.

Action:	AR to provide update on the activities of and involvement with the Gypsy and Traveller Community Team.
Date:	Next meeting.

3. Equality Delivery System Review 2013

3.1 AR advised that she had met with GD prior to the meeting to discuss the EDS Review 2013 report. GD assigned owners to each of the recommendations for action within the report and will write to the relevant Directors to seek a nominated lead who will develop and maintain the action plans to ensure the recommendations are implemented in 2013.

3.2 It was noted that the report also contains other recommendations which require Directorate review to determine how they can be implemented, either through existing workflows or the creation of new processes.

Action:	GD to write to the relevant Directors to identify nominated leads for action plans and to advise on supplementary recommendations.
Date:	By 6 May 2013 (Related items: 3.3 and 3.4)

3.3 The meeting discussed whether the report provided sufficient clarity and detail to ensure the recommendations are understood and meaningful action plans are developed. As it stands, it is necessary to read the full report, including the appended discussions, to determine exact requirements. It was agreed that AS will create a template for each recommended action which incorporates clear and detailed explanations, linked to a draft plan. Where applicable, for Objectives 1 and 2, related actions will be collated. IA, LW and RI will review the template prior to circulation.

Action: Action plan template created by AS to be reviewed by IA, LW and RI prior to circulation.

Date: By end April 2013 (Related item: 3.2)

3.4 The timescales associated with the approval of the EDS Review 2013 report and its associated recommendations were discussed. It was agreed that a paper will be presented to the Trust Board in May, outlining the purpose of the Review and requesting approval of the revised Objectives. The paper will explain the requirement for action plans, how they will be developed and the necessity for all actions to be achieved by the end of March 2014. Nominated staff responsible for action plans should contact AR if they are unsure about what is required.

Action: AR to prepare Trust Board paper for May meeting.

Date: By 6 May 2013

3.5 It was agreed that the wording of the second row heading in each recommendation will be changed to: "Proposal for 2013 Objective xx".

Action: AS to update relevant headings in the EDS Review 2013 report to ensure they are concise and as agreed by IWG.

Date: By 3 May 2013 (Related item: 3.4)

3.6 IWG agreed changes made to Objective 3 as a result of feedback received after the group papers were circulated. The report is recommended for submission to the Trust Board, pending the agreed changes.

4. Transgender Workstream – progress update

4.1 Feedback from Paula Dooley (PD) of GIRES has been incorporated into the draft Transgender Policy. AR thanked PD for her contribution and acknowledged the amount of work that had taken place to develop the policy.

4.2 A pre-meeting discussion had taken place between GD and AR on the issues faced in moving the policy forward. GD took the decision that, as this is a staff policy, ownership is to pass to Workforce Development Human Resources, with Learning and Development involved as necessary. AR advised IWG that the Transgender Working Group met on 27 March 2013 to review the policy. Revisions and comments arising will be incorporated into a new draft version which will be provided to FON.

4.3 A discussion took place on the review and approval process for the policy and there is an expectation from IWG that the policy will be implemented by September 2013. It was agreed that the Foundation Council will review the policy prior to approval and the final draft will be presented to IHAG and IWG for comment and as part of the EA process. Final approval will be in line with the Trust's approved process, via an appropriate Working Group and Committee within Workforce Development.

Action: AR to advise FON of the decision regarding policy ownership and the requirements regarding review, approval and implementation. Revised draft policy to be provided.

Date: w/c 8 April 2013

5. Staff Networks

5.1 The meeting discussed the need to raise awareness of Staff Networks and agreed that leaflets should be given out at induction and as part of the Advice Support and Knowledge (ASK) pack being launched in May. ASK advisers will be asked to keep leaflets in their packs. It was agreed that a copy of the leaflet will be circulated with these minutes.

Action:	AR to advise L&D of requirement for Staff Network leaflets to be included in ASK packs.
Date:	End April 2013

5.2 Additional means of raising the awareness of staff were considered, including an article in the Weekly Bulletin, printed posters on noticeboards and having a stand at the Trust's AGM.

6. Inclusion Hub Advisory Group and progress update

6.1 The draft minutes of the last IHAG meeting were circulated ahead of the meeting for review. AR advised that there was a lot happening for IHAG and the agenda for the next meeting was almost full. The meetings were going well and members were enthusiastic.

7. Foundation Council (FC)

7.1 IA provided an update in relation to the Foundation Council (FC) meeting held on 5 February 2013, the minutes of which will be circulated w/c 1 April 2013. A number of areas were considered on the agenda, including further review of the staff suggestion scheme. IA, LW, JC, AR and Nigel Sweet formed a sub-group to review and redraft the scheme to ensure staff input and ideas are recognised by the Trust and IA thanked her colleagues for their hard work in this respect. A request will be made to include information on the scheme within the ASK pack and further consideration is being given to what support is required to publicise the scheme.

7.2 IA's overview also included the FC's discussion on incentivising staff and the CEO's request for FC members to further the discussions with colleagues and bring any ideas back to the next FC meeting; a presentation on supporting staff in effective clinical decision making; and a presentation on future technology which will be introduced for mobile communications.

8. Equality Analysis – process and training

8.1 AR reported that the Development and Management of Trust Documents Policy will be revised so the EA appears as the first item to be completed within a document template. All EAs must be signed off, or rejected, by a member of IWG and without this sign off the document cannot be presented for approval. It was agreed that guidance will be provided to Committee and Working Group Chairs which will enable them to have a better understanding of what constitutes a good EA. IWG members will receive a copy of the guidance with a checklist to support the EA review and verification process.

Action:	AR and LW to review guidance to Committee and Working Group Chairs and provide a checklist for the process.
Date:	Next meeting

9. Any other business

9.1 To enable effective monitoring of actions it was agreed that an Action Log will be created to capture all outstanding IWG actions. This will be circulated prior to the next meeting.

9.2 The frequency of History Marking meetings was discussed, as irregular meetings have given rise to concerns regarding adverse impact on patients and staff. The History Marking Policy requires monthly review meetings and there are no documented circumstances in which a meeting cannot be held. It was agreed that IA will feedback the concerns to the person responsible for the Policy.

Action:	IA to liaise with Asmina IChowdhury to ensure feedback is provided regarding the History Marking Policy.
Date:	Next meeting

9.3 Whilst it was acknowledged that the low attendance at this meeting was, in part, due to REAP 4, it was highlighted that consistent low attendance is an issue. With regard to deputies, it is felt that a single nominated deputy would be preferable to ensure consistency and appropriate sharing of information. As a result of discussion it was agreed that (a) an attendance review will be carried out by AS; (b) a proposal for consideration regarding attendance will be developed by LW, IA and AR; and (c) the Terms of Reference will be reviewed and updated by AR and include a requirement for appropriate feedback from a single nominated deputy. The output from these actions will be circulated with the agenda for the next IWG meeting and feedback requested prior to that meeting.

Action:	Review of attendance, proposal on future attendance and reviewed Terms of Reference to be circulated for feedback and discussion.
Date:	Next meeting

9.4 JR and MR advised they will be unable to attend the next meeting. AR will ask two other members of IHAG to attend in their place.

10. Date of Next Meeting

10.1 The next meeting would be arranged for 10.00 a.m. on 23 May 2013 at Coxheath.