NHS
Cornwall and
Isles of Scilly

Equality and human rights strategy

Date approved: 21 June 2022

NHS Cornwall and Isles of Scilly Integrated Care Board
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1. Our vision

In all of the work we do, NHS Cornwall and Isles of Scilly Integrated Care Board (ICB) aims, within available resources, to improve the health and wellbeing of the population of Cornwall and the Isles of Scilly.

The general duty requires NHS organisations to have due regard to the need to:

- eliminate discrimination, harassment, victimisation, and another other prohibited conduct
- advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it
- foster good relations between persons who share a relevant protected characteristic and persons who do not share it

We will strive to ensure an equitable and comprehensive service for all of our population, irrespective of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, including nationality and ethnic origin, religion or belief, sex, or sexual orientation.

Our strategy revolves around 4 main areas:

1. better health outcomes
2. improved patient access and experience
3. workforce health and wellbeing
4. having inclusive leadership

This strategy sets out our commitment to ensuring that equality and human rights continues to be embedded in everything we do. This includes commissioning services, employing people, developing policies, and consulting with and involving people in our work.

2. Equality Act 2010

The Equality Act 2010 detailed nine protected characteristics and placed general and specific equalities duties on all public sector organisations, of which the ICB is one.

Protected characteristics

Age

This protected characteristic is critical to Cornwall and the Isles of Scilly in two ways. The demography of the area shows a higher than national average proportion of older people resident, and in need of healthcare services, and the local NHS has an ageing workforce. For example, we will need to ensure the provision of flexible retirement opportunities for older workers. Age legislation is not, however, solely focused on older people, and it is recognised that the organisation must help to ensure adequate, accessible, and trusted service provision and employment opportunities for young people across the health community.

Disability

A disabled person is defined as someone who has a physical or mental impairment that has a substantial and long-term adverse effect on their ability to carry out normal day to day activities. The ICB's commissioning intentions are intended to support people with a disability of all ages to live independent lives. We will do all we can to enable people with a learning disability to access mainstream services. We will work to commission services to support people with long-term conditions and disabilities to improve their quality of life, and their health outcomes.

Gender reassignment (trans/transgender)

This characteristic applies to people whose gender identity is different to their physiology. People who identify as trans/transgender do not have to have undertaken any medical procedure or be under medical supervision to be protected. They may have started or completed a process to change their gender. An example would be ensuring that colleagues within the organisations from which we commission services understand how to protect the dignity and respect of transgender people accessing health services and requiring inpatient provision.

Marriage and civil partnership

This essentially protects colleagues who are married or in a civil partnership from discrimination. When commissioning services we will ensure that colleagues are encouraged to think about the language used when referring to partner and not assume that the partner is of the opposite sex.

Maternity and pregnancy

A woman is protected against discrimination on the grounds of pregnancy and maternity during the period of her pregnancy and any statutory maternity leave. For example, allowing pregnant workers to work more flexibly, split or take additional breaks where requested. The characteristic also covers the rights of nursing mothers to breast feed in public places. We will work with our providers to help to ensure that maternity services are provided to offer women more choice around where to have their babies in a clinically safe way.

Race

The colour, nationality, or ethnic origin of a person (including Cornish and Scillonian). The organisation gathers this information to help to ensure services meet the needs of people from different ethnic groups, for example providing health information in different languages if a person's first language is not English and understanding how ethnic origin can have different effects on people's health. Within employment practices, we will work towards a workforce that is reflective of our community.

Religion and belief

This protects people from discrimination in relation to their religion or belief, or when people do not hold a religious belief. This applies to people accessing services, for

example, ensuring religion and beliefs are considered when developing care plans such as noting particular food and drink which are to be avoided. Within employment, the ICB promotes a flexible working environment and treats people according to their individual needs. This includes tolerance and consideration of the needs of people of different religions, for example, requests for time off work during religious holidays.

Sex

This protected characteristic requires the organisation to consider the health inequalities between men and women when commissioning services and promote equality of opportunity in employment. For example, looking at how to encourage more men to visit their GP to benefit from earlier detection of serious health conditions, and to ensure that in our commissioning strategies we understand that whilst women live longer than men, they can spend more years in poor health; or regarding our colleagues, ensuring men and women receive the same level of pay for similar work.

Sexual orientation

This applies to unlawful discrimination on the grounds of people being attracted or perceived to being attracted to people of the same sex (lesbians and gay men) and the same and opposite sex (bisexuals). It also includes people attracted to people of the opposite sex (heterosexual). We will ensure we are aware of any national intelligence around the health of people who are lesbian, gay or bisexual and work to improve outcomes access and experience.

The general duty

In all of its work, the ICB will have due regard to the need to:

- eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Equality Act 2010
- advance equality of opportunity between people who share a protected characteristic and people who do not share it
- foster good relations between people who share a protected characteristic and people who do not share it

The specific duty

The specific duty requires the ICB to:

- publish equality information
- set equality objectives at least every four years

3. How we will meet the public sector equality duties

In November 2011, the Department of Health launched the Equality Delivery System (EDS), a tool to help NHS organisations meet their statutory duties. The Equality

Delivery System 2 was launched in November 2013. The Equality Delivery System 2022 was launched in August 2022. The ICB uses this framework, which relies on community engagement in the setting and delivering of equality objectives, and in assessing our progress against both these objectives and the EDS indicators.

The current objectives are:

- raise awareness of protected characteristics and their cultures
- monitor our workforce and our recruitment, promotion, and selection processes
- develop our workforce across all levels of the organisation, where staff are engaged and supported, and leaders and managers foster a culture of inclusion, wellbeing, and diversity

Objectives are required to be revised at least every 4 years and are revisited yearly as good practice.

4. Impact assessments

We will undertake robust impact assessments on our policies, strategies and plans to ensure that we meet our statutory duty, taking action to reduce any inequalities highlighted as a result of this.

Where possible within joint/ partnership working initiatives, the ICB will collaborate with joint impact assessments to help to ensure consistency across organisations and fairness of service provision.

5. Human rights

The Human Rights Act 1998 details the basic rights all individuals have, regardless of who they are, where they live or what they do. Human rights are underpinned by 5 values which we will strive to embed within the organisation. These are:

1. fairness
2. respect
3. equality
4. dignity
5. autonomy

We will work to ensure that the organisations from which we commission services are as committed to human rights as we are and will work with them to continually improve people's experience, ensuring a personal fair and diverse service, and treating patients with dignity and respect. A human rights statement and guidance document is available. Human rights are also covered as part of mandatory training requirements for all ICB colleagues.

6. Better health outcomes

People's safety is of great importance to us, and we will work to ensure patient safety outcomes are able to be measured by our providers, with an emphasis on

keeping people safe, cleanliness and the environment and infection prevention and control. We will work with our providers to help to ensure that people with protected characteristics are safe in their care, and in particular, free from abuse, harassment, bullying and violence from other people and staff. Safeguarding is of particular significance and particularly affects older people, children, and disabled people.

We will ensure that any specifications for services include equalities so that healthcare providers understand what is required of them in helping to improve outcomes for protected groups.

We will help to ensure that healthcare providers offer a personal, fair, and diverse service tailored to individual need.

We will work with public sector partners in understanding the health needs of our population, using joint strategic needs assessments and health and wellbeing strategies.

We will work towards ensuring that any proposed service changes are properly impact assessed to inform the planning process, which when appropriate will be undertaken in consultation with relevant protected groups.

We will lead the local health community's accessible communications work so that public facing information can be easily understood by all. This work is in line with the NHS Accessible Information Standard.

7. Improved patient access and experience

We will work with providers to help ensure services are accessible for all protected groups, and to improve communication between healthcare providers and members of the public and carers.

We will continue to focus our providers on dignity and respect in patient care, particularly with regard to improving care of older people and vulnerable groups.

We will embed dignity and respect and positive patient experience across all protected groups into the ethos and culture of the organisation, commissioning a personal, fair, and diverse service.

We will work to ensure that our providers gather and report information about patient experience across all protected groups, working towards ensuring that the numbers of patients reporting positive experience of their care and treatment continues to improve.

We will gather data on people who use the complaints procedure to ensure that all protected groups are able to use the procedure and are fairly treated.

We understand that there are some vulnerable groups who need additional support engaging with healthcare, for example, Gypsy, Roma and Traveller communities. We will work with them to try to find solutions to improve their access, experience, and outcomes.

We understand that temporary residents may be vulnerable, due to access to healthcare needs and access to health-related information needs.

8. Workforce health and wellbeing

We aim to attract, develop, and retain a workforce which reflects the population we serve and recruit from, and to encourage our healthcare providers to do the same. We will ensure that our employment policies and practices are inclusive, and that we demonstrate our commitment to equality through our words, actions and deeds.

We will provide a robust equality and diversity policy which sets out the ICB's equality, diversity and human rights commitments, and details how equality, diversity and human rights will be applied across employment, service planning and commissioning within the ICB.

We will monitor our workforce, recruitment and selection processes and gather and publish workforce data. This is to ensure there is no unlawful or unintended discrimination in our processes and procedures. We will do this through our equality information and by monitoring our performance against the workforce race equality standard (WRES) and gender pay gap.

We will use the WRES to demonstrate progress against a number of indicators of workforce equality, including a specific indicator to address the low levels of ethnic minority board representation. An action plan has been produced to demonstrate progress against the indicators in the WRES.

We will use the gender pay gap to ensure men and women receive the same level of pay for similar work. The gender pay gap and action plan will be used to demonstrate progress against reducing our pay gap between employees of different sexes.

We will seek to retain our Disability Confident scheme status. It is a scheme that is designed to help organisations recruit and retain people with a disability and people with health conditions for their skills and talent. Disability Confident will help the ICB provide support to colleagues for their health and wellbeing.

We will seek to retain our Mindful Employer status. This is a long-term pledge to support the mental wellbeing of colleagues. Mindful Employer status will help the ICB provide support to colleagues for their mental health and wellbeing.

We will continue our programme of work around out prejudice, celebrate diversity. The ICB believes in a workplace that is truly equal. We aim to ensure the ICB is using the lessons learned from becoming a Stonewall diversity champion and applying them to other protected characteristics.

We will undertake annual staff surveys and form action plans to continue to support colleagues in the workplace.

We will train colleagues to ensure that they understand how critical equality and human rights is to our work as a commissioner and are able to undertake full and robust impact assessments on their work and incorporate the outcomes into amended work plans which seek to reduce health inequalities.

The ICB does not tolerate abuse, harassment and bullying in the workplace. Redress is open and fair to all. Preventative measures, support and advice on abuse, harassment, bullying and physical violence will be available to all.

9. Inclusive leadership

We have a nominated board level equality champion to lead and embed this work throughout the organisation.

We work with local partners to share knowledge and good practice.

We will continue to develop our website to improve information and increase access.

We will ensure that all colleagues are aware of the importance of diversity and its ability to improve outcomes and experience.

We will participate in national programmes in order to strengthen our knowledge and capacity in equality and human rights practice.

Our leaders will live our values and support a diverse workforce in continuing to promote the values of out prejudice, celebrate diversity.

We will champion events which promote understanding and respect such as Cornwall Pride and use our attendance to develop our plans and strategies with different protected groups. We will use local events to consult on our work with regards to equality and human rights, particularly in relation to EDS.

Appendix 1: Impact assessment

Name of policy or service to be assessed: Equality and human rights strategy
Department or section: Equality and diversity
Date of assessment: 26 May 2022
Person(s) responsible for the assessment: Jayna Chapman
Is this a new or existing policy? Existing

Aims, objectives and purpose of the policy

Describe the aims, objectives, and purpose of the policy.
This strategy sets out our commitment to ensuring that equality and human rights continues to be embedded in everything we do. This includes commissioning services, employing people, developing policies, and consulting with and involving people in our work. We will strive to ensure an equitable and comprehensive service for all of our population, irrespective of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, including nationality and ethnic origin, religion or belief, sex or sexual orientation.

Our strategy revolves around 4 main areas:

- better health outcomes
- improved patient access and experience
- workforce health and wellbeing
- having inclusive leadership

Who is intended to benefit from this policy, and in what way?
ICB colleagues and members of the public.

What outcomes are wanted from this policy?
The strategy supports ICB colleagues and members of the public to understand our approach to embedding equality, diversity and human rights within our work. It sets out the legislative requirements and how we will meet the duties.

What factors or forces could contribute or detract from the outcomes?
Lack of resources and time.

Who are the main stakeholders in relation to the policy?
ICB colleagues
ICB governing body
Members of the public

Who implements the policy, and who is responsible for the policy?
Equality and diversity manager
People and organisational development team
ICB colleagues

Differential impacts

Does this have a positive or negative impact on people from an ethnic minority background? How will any negative impact be mitigated?
Promoting equality and human rights issues within the organisation is relevant to all diversity strands. Workforce health and wellbeing includes information about the workforce race equality standard reporting and action planning. Improved patient access and experience includes information about the importance of making reasonable adjustments to ensure we are listening and understanding the access, experience, and outcomes of all our community.

Does this have a positive or negative impact on people who identify as male, female or intersex? How will any negative impact be mitigated?
Promoting equality human rights issues within the organisation is relevant to all diversity strands. Workforce health and wellbeing includes information about the gender pay gap reporting and action planning.

What is the positive or negative differential impact on people from the perspective of disability? How will any negative impact be mitigated?
Promoting equality and human rights issues within the organisation is relevant to all diversity strands. Better health outcomes includes information about safeguarding. It also references how we will lead the local health community's accessible communications work so that public facing information can be easily understood by all. This work is in line with the NHS Accessible Information Standard. Workforce health and wellbeing includes information about our commitment to the Disability Confident scheme.

Does this have a positive or negative impact on people who identify as heterosexual, lesbian, gay, bisexual, pansexual or asexual? How will any negative impact be mitigated?
Promoting equality and human rights issues within the organisation is relevant to all diversity strands. The ICB's predecessor, NHS Kernow Clinical Commissioning Group, was a Stonewall diversity champion and the ICB is continuing this work through our programme, out prejudice, celebrate diversity. We also attend and sponsor Cornwall Pride. This is referenced in workforce health and wellbeing and inclusive leadership.

What is the positive or negative differential impact on people from the perspective of age? How will any negative impact be mitigated?
Promoting equality and human rights issues within the organisation is relevant to all diversity strands. Better health outcomes includes information about safeguarding. It also references how we will lead the local health community's accessible communications work so that public facing information can be easily understood by all. This work is in line with the NHS Accessible Information Standard. Improved patient access and experience references the importance of dignity and respect in patient care, particularly regarding improving care of older people and vulnerable groups.

What is the positive or negative differential impact on people from the perspective of religion or belief? How will any negative impact be mitigated?
Promoting equality and human rights issues within the organisation is relevant to all diversity strands.

What is the positive or negative differential impact on people from the perspective of marriage and civil partnership? This is particularly relevant for employment policies. How will any negative impact be mitigated?
Promoting equality and human rights issues within the organisation is relevant to all diversity strands.

Does this have a positive or negative impact on people who identify as trans or transgender, non-binary, or gender fluid? How will any negative impact be mitigated?
Promoting equality and human rights issues within the organisation is relevant to all diversity strands. The ICB's predecessor, NHS Kernow Clinical Commissioning Group, was a Stonewall diversity champion and the ICB is continuing this work through our programme, out prejudice, celebrate diversity. We also attend and sponsor Cornwall Pride. This is referenced in workforce health and wellbeing and inclusive leadership.

Does this have a positive or negative impact on people who are pregnant, breast feeding mothers, or those on maternity leave? How will any negative impact be mitigated?
Promoting equality and human rights issues within the organisation is relevant to all diversity strands.

Are they any other identified groups? How will any negative impact be mitigated?
Promoting equality and human rights issues within the organisation is relevant to all diversity strands, inclusion health groups and other identified groups. The focus on human rights, equality and diversity in this guidance should ensure that services better respond to individual needs, therefore resulting in improved services.

Human rights values

How have the core human rights values of fairness, respect, equality, dignity, and autonomy been considered in the formulation of this policy, service, or strategy?
The core human rights principles underpin the basis of this document.

Which of the human rights articles does this document impact?

☒ To life
☒ Not to be tortured or treated in an inhuman or degrading way
☒ To liberty and security
☒ To a fair trial
☒ To respect for home and family life, and correspondence
☒ To freedom of thought, conscience, and religion
☒ To freedom of expression
☒ To freedom of assembly and association
☒ To marry and found a family

☒ Not to be discriminated against in relation to the enjoyment of any of the rights contained in the European Convention
☒ To peaceful enjoyment of possessions

What existing evidence (either presumed or otherwise) do you have for this?
The core human rights principles underpin the basis of this document.

How will you ensure that those responsible for implementing the policy are aware of the human rights implications and equipped to deal with them?
The human rights statement and guidance document is available for all staff. It accompanies the equality impact assessment and full impact assessment templates and guidance, to provide comprehensive information for colleagues. Human rights training also forms part of the ICB's mandatory equality and diversity training requirements.

Public Sector Value Act 2012

NHS Cornwall and Isles of Scilly is committed and obliged to fulfil the requirements of the Public Sector Social Value Act 2012. This Act requires the organisations to consider how services commissioned or procured might improve the economic, social, and environmental wellbeing of an area.

Please describe how this will support and contribute to the local system, wider system, and community.
Working with our population and our partners on equality, diversity and human rights will have a positive impact upon the local system, wider system, and community.

Describe how the policy contributes towards eliminating discrimination, harassment, and victimisation.
The strategy is a public commitment detailing how we plan to meet our equality duties and includes areas of work around the protected characteristics. It includes our commitment to eliminate unlawful discrimination between different protected groups.

Describe how the policy contributes towards advancing equality of opportunity.
The strategy is a public commitment detailing how we plan to meet our equality duties and includes areas of work around the protected characteristics. It includes our commitment to advance equality of opportunity and improve health outcomes for different protected groups.

Describe how the policy contributes towards promoting good relations between people with protected characteristics.
The strategy is a public commitment detailing how we plan to meet our equality duties and includes areas of work around the protected characteristics. It includes our commitment to tackle prejudice and promote understanding between protected groups.

If the differential impacts identified are positive, explain how this policy is legitimate positive action and will improve outcomes, services and or the working environment for that group of people.
Promoting equality and human rights issues within the organisation is relevant to all diversity strands, inclusion health groups and other identified groups. The focus on human rights, equality and diversity in this strategy should ensure that colleagues are well supported and services better respond to individual needs, therefore resulting in improved services.

Explain what amendments have been made to the policy or mitigating actions have been taken, and when they were made.
None identified.

If the negative impacts identified have been unable to be mitigated through amendment to the policy or other mitigating actions, explain what your next steps are using the following equality impact assessment action plan.
Not applicable.

Signed (completing officer): Jayna Chapman

Date: 26 May 2022

Signed (head of department or section): Trudy Corsellis

Date: 30 June 2022

Please ensure that a signed copy of this form with the policy is sent to both the corporate governance team and equality and diversity lead.