



**GIG**  
CYMRU  
**NHS**  
WALES

Bwrdd Iechyd Prifysgol  
Cwm Taf Morgannwg  
University Health Board

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# Strategic Equality Plan 2021-25

## **Updated Strategic Equality Plan (SEP)**

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## **Updated Strategic Equality Plan (SEP) March 2021**

### **1. Purpose**

Our Strategic Equality Plan sets out our strategic aims in three key areas:

- a) Improved access and experience for patients throughout our Health Board
- b) Improved staff engagement and experience
- c) Mainstreaming, monitoring and compliance with regulation

These strategic aims support our ambition to become a leader in equality, diversity, and inclusion across NHS Wales.

### **2. Background**

The current Strategic Equality Plan, 2020-24 (SEP) for Cwm Taf Morgannwg University Health Board, was agreed and published in March 2020, in accordance with the Public Sector Equality Duty which supports the Equality Act 2010. It took account of key reports such as '*Is Wales Fairer?*' and specific feedback from the Equality Commissioner in a national stakeholder event held in 2019. Engagement was undertaken within the organisation and with key stakeholders in the local community as well as with national organisations. This ensured that it met legislative requirements and standards expected by the Equality and Human Rights Commission.

The Covid-19 pandemic impacted on our services, staff, and communities almost immediately after this and the Equality and Human Rights Commissioner wrote to all Chief Executive Officers in NHS Wales on July 16<sup>th</sup> 2020 stating that '*the disproportionate impact of coronavirus on particular protected groups, both in terms of peoples' health and their experiences of discrimination means that equality and human rights must continue to be central to decision making going forward. The current pandemic has further amplified and exacerbated existing inequalities in Wales, including for those with protected characteristics and socioeconomically disadvantaged groups. Equality and human rights must be central to the thinking and planning of public bodies whilst we are in the midst of the pandemic, and critically for the recovery phase. This is vital to ensure existing inequalities don't become further entrenched'. In-light of the pandemic the Commission would advise health boards and NHS Trusts that they should review their strategic equality plans to identify the key inequalities exacerbated by the Coronavirus pandemic and create a clear*

*action plan with equality outcomes to build a more equal and fair Wales as we recover from the crisis’.*

Our review of the SEP has taken account of the Welsh Parliament Equality, Local Government and Communities Committee report *‘Into sharp relief: inequality and the pandemic, August 2020’* with particular reference to the findings that those living in poverty and also men, older people and people from Black, Asian and minority ethnic groups, people with existing health conditions, disabled people and people living in deprived areas having higher coronavirus mortality rates; women make up the majority of health and care staff, and have taken on the majority of unpaid care of children and relatives; disabled people are particularly affected by social distancing and the changes to our built environment; and as well as being most at risk of the virus, older people have experienced additional distress due to fears about access to treatment and care, isolation due to shielding, and abuse.

In broad terms, the report also emphasises the importance of robust and transparent equality impact assessments (EIAs), specifically to not just reduce inequality but to increase equality. There will be a major drive to ensure that EIAs are embedded in the decision making process and based on relevant, meaningful data and engagement with relevant communities.

It also recognises that data is generally poor as the most recent census data, 2011, is out of date and patient ethnicity and disability data, is generally not collected. Workforce equality data is also generally incomplete throughout the health sector and all of these considerations are included in the plan.

Similar concerns are recorded in the Equality and Human Rights Commission report *‘How Coronavirus has affected Equality and Human Rights’*, October 2020. In broad terms, this report captures issues such as young people being affected by job losses and having less opportunities; older people having less access to service and visits; the shift towards on-line services can disadvantage older and/or disabled people; an increase in domestic abuse which can particularly impact on women, young people, disabled people, LGBT people and people of BAME origin. The report calls for greater monitoring and reporting on the experience of people of BAME origin and disabled people.

In addition to the above, it is important to note that whilst the new Socio-Economic Duty was postponed until April 2021, this is now imminent. The overall aim of the duty is to deliver better outcomes for those who experience socio-economic disadvantage. Once agreed, it will be fundamental to the equality impact assessment process and the development of fair and equal services.

From an internal perspective, critically, staff from BAME backgrounds have reported incidents of racism and racist comments being directed at them. In some cases, staff have expressed concern that they feel unable to bring their authentic selves to work, feeling the need to conform to the dominant culture within our Health Board.

### **3. How we have changed our SEP**

Whilst our strategic aims have not changed, our specific actions have been reviewed and amended to cover the issues detailed above. Our 3 aims are improved access and experience for patients throughout the health board; improved staff engagement and experience and mainstreaming, monitoring and compliance. We have taken account of our communities e.g., the high proportion of people who have a disability or life-limiting illness and the need to focus on the needs of patients and staff who have disabilities.

All references to services, will include specific Covid developments as well as ongoing service delivery, recognising that the latter is undergoing change as a result of the pandemic as we 're-set'.

### **4. How we will take the SEP forward and achieve the plan**

Our Strategic Equality Plan takes account of our statutory obligations under the Equality Act and It will be of fundamental importance to ensure that our approach is not 'silo-ed' and that there is a two way process of mainstreaming everything we do in terms of communicating and sharing the SEP. This includes working with our networks, Workforce & OD partners and ensuring it is embedded in Locality based service group action plans, Corporate plans, Communication and Engagement strategies and Patient Care and Safety plans. It is essential that it is embedded into the Integrated Medium Term Plan ensuring that full account is taken of diversity and inclusion making it fundamental to the business and services the health board provides.

We will continue to collaborate with our partners within and outside the health board to influence the SEP throughout its 4 year duration by responding to issues and new developments that emerge in our population so that it is a living, iterative document and responsive to the needs of the organisation. We will do this through ongoing engagement with relevant partners in Locality based service groups and corporate departments whilst also responding to our staff networks, ensuring we also listen to them and ensure their agendas are supported.

Progress against the SEP will be monitored and reported to the People and Culture Committee at regular intervals and via an annual Equality board report.

The plan is outlined below and further detail in relation to specific actions and key performance indicators can be found in Appendix 1 (to be developed once this approach is agreed).

Whilst every effort has been made to ensure that the SEP is short, succinct, and easy to read, we have endeavoured to present it in a pictorial format in order to reach more people in an understandable way – see Appendix 2. We are also commissioning an Easy Read version.

## 5. Our Strategic Aims

Our three strategic aims provide an overview of the work which we will undertake for patients, staff in relation to mainstreaming, and to ensure that we meet our mainstreaming, monitoring, and compliance obligations. Further information in relation to specific protected groups and how we will achieve these aims can be found in Appendix 1, Action Plan and Milestones.

### **Strategic Aim 1: Improved access and experience for patients throughout the health board**

#### **Strategic Objectives**

We will work with Localities (ILGs) and Corporate departments in order to achieve the following actions, using local diversity and inclusion plans.

- Improve access to services for protected groups under the Equality Act 2010 including those of Black and Asian Minority Ethnic (BAME) origin, older people, those with disabilities including sensory loss and other groups identified in *Is Wales Fairer* (with particular emphasis on access to Mental Health services) and also in the Covid reviews mentioned earlier in this document. Taking a proactive approach to Equality Impact Assessment will be fundamental to this specifically in the current move towards 're-setting' services.
- Improve the accessibility of patient information and improve communication and engagement undertaken by key departments, the conduct of public events etc. This will include interpretation, use of Welsh language and meeting the needs of different age groups, people with disabilities and different cultures. Guidance has been developed on accessible information and the organisation of public events and this will be shared with key stakeholders including our Communication and Engagement Team, Corporate departments, and our new patient reader group.
- To embed the All Wales Standards for Accessible Communication and Information for People with Sensory Loss, ensuring a wide range of accessible resources are available for staff and patients in order to continually improve patient care.
- Implement the Welsh Language Standards in order to ensure compliance and improve the experience of Welsh speaking patients and staff.
- Continually review, commission, or develop and deliver focussed and relevant Equality training for staff. This will include addressing key issues identified in *Is Wales Fairer?* e.g., *hate crime directed against specific groups such as race and religion* and issues identified through monitoring mechanisms (e.g. Datix and the reporting system we are currently developing and complaints, also feedback from staff, patients, and the community
- Ensure ongoing communications to staff and our communities based on an Equality calendar which will ensure key messages are

delivered at key times linked to our Values and Behaviours work and promotion of our own resources.

- Encourage patient engagement with our agenda at every opportunity throughout the health board in order to empower protected groups to influence appropriate service delivery. We will work with key stakeholders in our Communication and Engagement team who are developing patient panels for service developments. Again, this will include addressing specific issues which arise via complaints, other feedback and focus groups.

## Strategic Aim 2: Improved staff engagement and experience

### Strategic Objectives

In pursuit of our ambition to become a leader in equality, diversity, and inclusion across NHS Wales, we will work to ensure that:

1. Our workforce is diverse not only in its makeup but also in the way that we embrace and celebrate our differences
2. All staff can express themselves freely and feel that they are not only included but that they belong, regardless of their background or preferences
3. There is equity of opportunity for staff from represented groups

To achieve these aims, we will work with the Workforce and OD Directorate and other Corporate departments to promote Equality, Diversity, and Inclusion (EDI) in a number of ways:

- **Policy** – we will promote a culture of zero tolerance on any form of discrimination or inequality. We will achieve this by ensuring that everyone is aware of Equality Policy and how to report issues, and that our leaders are skilled in dealing with incidents related to discrimination.
- **Process** – We will adopt a systemic, business led approach to EDI by ensuring that our policies, practices, and structures are regularly reviewed for culturally competent practice.
- **Leadership** – we will set clear and measurable EDI goals for increasing diversity at senior levels and on our management boards. We will build awareness of how to tackle inequalities at a systemic level by developing a more comprehensive Inclusive Leadership Development Programme.
- **Reporting** – we will set clear EDI targets against established EDI trends and regularly collect and analyse data to identify and explore areas where there might be barriers to achieving our EDI goals. We will regularly publish gender and ethnicity pay gaps data and report these to Boards and Committees and work improve the quality and completeness of staff equality data (including all aspects of employment and recruitment) and highlight and address diversity and inclusion issues which emerge. This will include

informing organisation wide plans and strategies, linking to Equality impact assessments and also developing specific EDI plans, as necessary.

- **Talent** – we will be proactive in our efforts to attract, develop and promote talent from BAME backgrounds. We will achieve this by continuing to promote the progression of under-represented groups, expanding senior leadership sponsorship for our networks, and establishing a reverse mentoring programme. We will actively seek to partner with agencies who have a clear EDI policy which promotes the recruitment of BAME talent. We will regularly review our recruitment, promotion, succession, and retention policies to ensure progression of all minorities across the organisation. We will also continue to leverage our internal networks to support the attraction, development, and retention of people from diverse backgrounds.
- **Culture** – we will continue to embed our values and behaviours into our culture and institute the principles of a 'Just and Learning Culture' to ensure that EDI sits at the heart of everything we do. We will work to develop understanding amongst leaders of the lived experiences of our protected groups by encouraging individuals to share their personal stories.
- **Employee Experience** - we will ensure that 'diversity and inclusion' is fundamental to our Employee Experience Framework which covers each stage of an employee's working life. We will achieve this by ensuring that all resources produced are regularly tested by our networks and that our protected groups are appropriately represented in project groups at all stages of our employee journey.
- **Networks** – we will continue to develop our networks to enable our representative groups to express themselves freely and promote inclusion via our new race equality plan. We will work to raise the profile and visibility of our BAME staff, addressing issues raised in our data analysis and ethnicity pay reviews and ensuring the progression of BAME staff at all levels and specifically including from entry level grades, band 2 and 5 and also in leadership. We will continue to develop our Disabled staff network and promote inclusion via the implementation of specific initiatives e.g., Disability Confident which can support the recruitment, experience, and retention of people with disabilities including physical, mental, and learning disabilities. This will include development of 'ability' passports to support individuals at every stage of their working life and assist them in achieving their potential.
- **Pay** - We will undertake regular gender pay reviews and develop a focussed action plan including the establishment of a Women's network focussing on career development opportunities from lower grades and also the move into senior positions. We will continue to review, report and act on pay difference with regards to protected characteristics including gender, ethnicity and disability and develop appropriate plans to close gaps and achieve equity. We will achieve this by setting targets for each protected group using external benchmarking data and reviewing these on a quarterly basis.

### Strategic Aim 3: Mainstreaming, Monitoring and Compliance

#### Strategic Objectives

We will work with Corporate departments and service leads to ensure inclusion of protected groups in health board business. Every attempt has been made to incorporate learning from Covid as well as other key documents such as is Wales Fairer.

- Ensure diversity and inclusion is an underlying principle in planning processes at every level and full account is taken of the new Socio Economic Duty so that it is embedded in planning processes.
- Review and enhance the Equality Impact Assessment process on an ongoing basis to ensure link to health equality and poverty as stated in the Socio Economic Duty and to ensure that robust, transparent EIAs are produced and monitored for all service and policy developments.
- Develop input from staff and patients from protected groups to the EIA process so that they can influence decision making in relation to buildings, service planning and employment practices.
- Link to health board monitoring mechanisms e.g., Patient Care and Safety audits so that diversity and inclusion are embedded in these processes.
- Work to improve data collection systems, in order to accurately capture all relevant data, with particular focus on data related to the specific duty under the Equality Act 2010 recruitment, promotion, access to training etc and the Accessible Information Standard. Identify and escalate issues of concern to Workforce & OD leads and jointly develop solutions.

**Throughout the four year duration of the plan, we will take account of new and emerging evidence and changing priorities in relation to all of our stakeholders and incorporate change via annual equality work-plans. Equality data relating to staff, patients and the local community will be fundamental to this.**

#### Protected Characteristic Specific Objectives

In accordance with the Public Sector Equality Duty, we set out our aims for each protected group in Appendix1 below.

We aim to ensure the best working life for staff from each of our protected groups and each of the actions below covers practical developments to enable them to thrive and progress. This will mean giving them a greater voice, influence and presence within the organisation and ensuring their inclusion in everything we do.

We also need to ensure equity of access to services and positive experience, and this is considered for each group. The equality impact assessment (EIA) process will be fundamental in addressing this for each of the protected groups.

Both of the above will also depend on our promotion of our diverse communities within the workforce and the local population, celebrating difference through events, comms and publicity and ensuring that our culture, including 'Values and Behaviours' 'Just and Learning' and other such developments are nurturing, supportive and inclusive.

None of the strands are exclusive, there will always be an overlap e.g., initiatives targeting young people may also focus on those from economically deprived backgrounds, of BAME origin or who have a disability. Initiatives to address racism will also be relevant to other groups who could experience prejudice and discrimination. Appendix I below details our measures, baseline and plans to address the distinctive challenges faced by each of our represented groups:

## Appendix 1 – CTM UHB EDI MEASURES

This section details the targeted action planned for each of the protected groups as required by the Public Sector Equality Duty. For each group, we identify progress already made and relevant data whilst that recognising for some groups, very little internal or external data is currently available and that is identified in the Strategic Aims section. It is also important to note that work has begun on Employee Experience and this allows consideration of Equality, Diversity, and Inclusion at each stage of our staff’s working life from the perspective of each protected group and the development of appropriate action throughout. This will supplement the specific actions listed below.

Protected Characteristic	External Trends	Baseline Position	Targeted Actions
<p><b>Age</b></p>	<ol style="list-style-type: none"> <li>1. Use data to understand whether the organisation is treating older candidates and employees fairly in the recruitment, performance, training, and progression processes</li> <li>2. Engage older workers to understand what they would like to see added to existing learning programmes</li> <li>3. Engage older workers in development programmes and in mentoring initiatives</li> <li>4. Develop training to help managers uncover hidden biases about older workers</li> <li>5. Encourage relationships between different generations to share knowledge to tackle problems from different perspectives</li> </ol>	<p>In relation to external trends, data on older staff in post and in the recruitment process is available for analysis.</p> <p>It should be possible to engage with older staff and seek their views via surveys, focus groups etc. This in turn can inform and action planning in order to address these initiatives.</p> <p>In terms of our own workforce profile, whilst we actively recruit new graduates into a wide range of professions, there is under-representation in the youngest age group (less than 1%). Apprenticeship opportunities are only available for existing staff so are not currently an active route to employment. Apprenticeships would offer an opportunity to redress this balance and to target under-represented groups e.g., BAME, disabled, socio-</p>	<p>Develop resources to support staff at each stage of their working life as part of the Employee Experience Strategy.</p> <p>Undertake age gap analysis and develop appropriate action plans accordingly.</p> <p>Develop resources for older staff so that they are able to continue to work longer if they wish e.g., managing health, flexible working and flexible access to pensions and support opportunities to move into new roles.</p> <p>As programmes and opportunities are developed, older staff can be targeted, and inclusive leadership training also explored.</p> <p>Encourage the recruitment of younger staff through changes to recruitment processes and development of apprenticeship opportunities.</p>

		economically deprived and help to encourage social mobility,	Improve access to services for older service users particularly as we move to remote, digital services.
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<b>Protected Characteristic</b>	<b>External Trends</b>	<b>Baseline Position</b>	<b>Targeted Actions</b>
<b>Gender</b>	<ol style="list-style-type: none"> <li>1. Set measurable goals for leadership team gender diversity</li> <li>2. Specify gender diversity in leadership team succession planning</li> <li>3. Stated initiatives to support progression of female employees</li> <li>4. Gender focused employee network</li> </ol>	<p>Our workforce is 80% female, however there is over-representation at lower bands and under-representation at higher bands leading to a 28% pay gap. Also 95% of part-time staff are females and this could limit opportunities for progression.</p> <p>There are resources in place e.g., work-life balance policies but targeted action will be necessary to address this. Previous research undertaken as part of the Women Adding Value to the Economy project identified specific issues e.g., the income/benefit balance at the lowest bands. Some of these issues were addressed at the time but should now be revisited.</p>	<p>Undertake regular gender pay analysis e.g., over-representation and lack of progression from lower bands and movement into senior roles.</p> <p>Set measurable goals for gender diversity at leadership levels and for succession planning.</p> <p>Establish a Women’s network in order to develop and implement an effective action plan to address identified issues.</p>

Protected Characteristic	External Trends	Baseline Position	Targeted Actions
<b>Race</b>	<ol style="list-style-type: none"> <li>1. Set measurable goals for leadership team ethnic diversity</li> <li>2. Report progress for leadership ethnic diversity</li> <li>3. Develop outreach programmes to recruit BAME talent</li> <li>4. Publish ethnicity pay gap</li> <li>5. Executive sponsor for BAME employee network</li> </ol>	<p>Our workforce profile has changed significantly in recent years and following a series of successful overseas recruitment campaigns and other recruitment, our BAME staff now represent 7% of our current workforce. Assessment and management of risk for this group have been a high priority over the last year and the Black Lives Matter campaign highlighted the international need for greater racial equality.</p> <p>We have established a thriving BAME network, with an established action plan which intend to grow and develop over the next 4 years. We also have an executive sponsor of BAME origin for this work.</p> <p>Recent reviews by Welsh Government and the Equality and Human Rights Commission and media coverage indicate the need to ensure engagement and health promotion within our BAME communities. 4 new posts have been funded.</p>	<p>Continue to grow our new and thriving BAME network and implement our race equality plan focussing on the visibility, support and also the career and professional development of our BAME staff.</p> <p>Undertake ethnicity pay gaps and action plan accordingly. This will include targeted conversations with band 5 nurses to understand barriers to their progression.</p> <p>Set targets for progression to leadership levels and for succession planning.</p> <p>Support our BAME communities through the development of BAME community engagement posts.</p>

Protected Characteristic	External Trends	Baseline Position	Targeted Actions
<b>Disability</b>	<ol style="list-style-type: none"> <li>1. Process in place to ensure employees with disabilities and long term conditions have the adjustments they need at work (e.g., assistive technology, ergonomic equipment, flexed working times)</li> <li>2. Clear and regular communications about why disability inclusion is important to the organisation</li> <li>3. Senior leaders in each area of the organisation ensure that disability inclusion is factored into their strategic plans</li> <li>4. Involve disability network in reviewing new policies and processes through an accessibility and inclusion lens</li> <li>5. Encourage senior leaders to talk about disability and to share personal experiences and stories</li> </ol>	<p>Only 1% of our staff have declared a disability compared to nearly 30% of our local communities who declare a disability or life limiting condition. This indicates under-representation and/or non-disclosure, both of which our new network are trying to address through communication and engagement. Improved data would allow meaningful analysis and action planning.</p> <p>We have a comprehensive set of resources for disabled staff on our intranet site which is regularly reviewed and updated.</p> <p>We have accreditation for our existing work as the first health board to achieve Disability Confident Leader status and this includes our policy work and resource development. However further work is required.</p> <p>Despite our extensive and award-winning work, training and communications undertaken in this area, we</p>	<p>Continue to develop our new Disabled staff network and promote and embed the Disability Confident scheme building on our Disability Confident Leader status. This will include reviewing and developing new policies. Continue to develop and share personal stories, particularly from senior staff as part of the Equality calendar.</p> <p>Raise awareness of disability issues and encourage the recording of disability on ESR in order to undertake effective analysis and build on our new action plan. This will include ensuring a supportive culture and focussed support e.g., through the introduction of 'ability passports' from appointment or from the point when they develop a disability.</p>

		<p>receive regular feedback including complaints that the needs of disabled service users are not always met.</p> <p>Over 20% of service users experience sensory loss and this rises in older age groups so the proportion could be greater for our in-patient population who are predominantly older.</p>	<p>Seek to improve access to services for Disabled service users by working on specific standards e.g., Sensory Loss and through the use of EIAs to ensure inclusion in strategic plans.</p>
<b>Pregnancy &amp; Maternity</b>	<p>The EHRC recommends the following action to address pregnancy and maternity discrimination:</p> <ol style="list-style-type: none"> <li>1. Leadership for change so that employers attract the best talent, create the conditions for their staff to perform well, and avoid the loss of skills and experience which can result from misconceptions and poor practice in relation to pregnant workers and new mothers.</li> <li>2. Improving employer practice including promotion of family-friendly workplaces, effective management, and open communication.</li> <li>3. Improving access to information and advice</li> </ol>	<p>Previous analysis was undertaken for this group as part of the WAVE review, and this indicated that few people did not return following maternity leave other than for personal reasons.</p> <p>There is very limited data on career progression post-maternity and there could be scope to improve this.</p> <p>We have developed a comprehensive resource to support staff throughout their pregnancy and maternity and this needs to be agreed and promoted.</p>	<p>Implement the Working Forward scheme in order to support staff and families during and after pregnancy and maternity ensuring they are able to achieve a work-life balance but also continue to develop their career.</p> <p>Promote our new Maternity Support resource which provides information for staff throughout their pregnancy and maternity.</p> <p>Develop, promote, and embed specific initiatives e.g., Working Forward to ensure a positive experience of women and families during and after pregnancy and maternity.</p>

	<p>So that pregnant workers and employers understand their rights and obligations.</p> <p>4. Improving health and safety management in the workplace so that employers manage risks effectively and pregnant workers are not forced to choose between their job and their health or the health of their unborn child.</p> <p>5. Improving access to justice i.e., enabling pregnant workers to raise complaints pre and post maternity.</p> <p>6. Monitoring progress</p>		<p>To survey the experience of Maternity Returners, from both a short and long term perspective and establish appropriate support and opportunities for career progression.</p>
<p><b>Sexual Orientation</b></p>	<ol style="list-style-type: none"> <li>1. Gather and monitor data on sexual orientation</li> <li>2. Executive sponsorship of LGBT employee network</li> <li>3. Senior leadership team meets periodically with LGBT employee network</li> <li>4. Share stories of visible LGBT role models from leadership team</li> <li>5. Use LGBT inclusion based competency requirements in recruitment process</li> </ol>	<p>Less than 2% of our staff have declared that they are lesbian, gay, or bisexual. National data is inconsistent with no widely agreed statistic regarding representation in the wider community.</p> <p>We have a well-established network with an LGBT Board sponsor who attends our meetings. Our communications have included personal stories from LGBT staff at many levels. We have made progress in this area from a policy and communications perspective.</p> <p>General feedback from younger LGBT* service users in the past</p>	<p>Continue to develop the LGBT* network with the aim of empowering and improving the experience of LGBT people at work, promoting an inclusive culture, and continually updating our action plan, targeting specific areas identified via targeted staff surveys and promoting the health board as an LGBT friendly employer. Include stories of vis</p> <p>Ensure that our communications and services are inclusive of our LGBT* communities.</p>

		suggested that more diverse images throughout our communications, reflecting same sex relationships would be welcomed. This could include literature, posters etc.	
<b>Religion or Belief</b>	<ol style="list-style-type: none"> <li>1. Clear guidance for managers on how to manage religion or belief requests</li> <li>2. Employees are able to speak openly about their beliefs in the workplace</li> <li>3. Celebrate a variety of cultures, customs, and religious beliefs throughout the calendar year</li> <li>4. Provide leadership support for employee-led religious celebrations</li> <li>5. Include discussions about religious requirements in onboarding process</li> </ol>	<p>There are very low numbers of staff who declare membership of religions other than Christianity, and this reflects the local community. However, we have tried to accommodate both staff and service users through prayer facilities and dedicated rooms, Spiritual Care policy (now due for review), our cultural toolkit which summarises the needs of different groups and the recognition of key religious dates. Our chaplains also tried to meet the needs of individuals during Covid through sharing essential prayers with staff etc.</p>	<p>Continue to promote and further develop our cultural toolkit to improve staff and patient experience.</p> <p>Ensure religious needs are met via accommodation of prayer time and facilities and meeting other cultural needs for staff and patients.</p>

<b>Protected Characteristic</b>	<b>External Trends</b>	<b>Baseline Position</b>	<b>Targeted Actions</b>
<b>Gender Reassignment</b>	<ol style="list-style-type: none"> <li>1. Raise awareness</li> <li>2. Foster an inclusive environment</li> <li>3. Improve engagement</li> </ol>	<p>Significant work has been undertaken in this area – the development of an award-winning helpline and policies for both staff and patients, the latter leading to a trans* toolkit which was shared throughout Wales. The resources have been used successfully for staff who are transitioning and also to raise awareness in specific services. Very little data is available for this workforce and population.</p>	<p>Support Trans* staff through our LGBT* action plan and network as above.</p> <p>Continually promote and update our new toolkit for Trans* patients in order to support Gender Identity pathway in Wales and ensure health board specific issues are addressed.</p>
<b>Socio-Economic Status</b>	<ol style="list-style-type: none"> <li>1. Actively promote entry level positions for young people from under-represented backgrounds</li> <li>2. Monitor data on the socio-economic background of employees (qualifications, type of school attended etc.)</li> </ol>	<p>A new socio-economic duty will be introduced in April 2021. As a health board recognised as having significant health inequalities compared to the rest of Wales and the UK, we have always taken account of our most deprived groups. This has been reflected in our EIA process.</p> <p>Very little data exists on socio-economic backgrounds</p>	<p>Link social deprivation and social mobility to our Employee Experience work and include active targeting of excluded groups for recruitment (e.g., working with poorly performing schools and areas of deprivation) and career development by linking to our talent management initiatives. This will include addressing issues of income/benefit balance in our lowest paid groups of staff.</p> <p>Ensure that the needs of socio-economically deprived sectors of our population are considered in policy and service development and EIA will be fundamental to this.</p>

<p><b>Mental Health</b></p>	<ol style="list-style-type: none"> <li>1. Leaders within the organisation speak openly about their lived experience of mental health conditions</li> <li>2. The organisation has a policy on mental health which includes tackling stigma</li> <li>3. The organisation provides mental health training</li> <li>4. The organisation tracks and monitors absence to understand the impact of mental health and wellbeing on individuals</li> </ol>	<p>As an organisation, we committed to Time To Change and we have a well-being team who provide a wide range of resources including access to counselling, mindfulness, and other well-being training.</p> <p>Sickness and absence data is recorded and monitored, and this includes analysis of stress related absence.</p>	<p>Explore the option of creating opportunities for young people with learning disabilities</p>
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## Appendix II – Action Plan

Action Plan and Milestones



Appendix 1 Action  
Plan and Milestones

**Commented [LJ(U-W&O1):** We will update this following our meeting on Monday.

**Appendix 2**



# Strategic Equality Plan 2020-24

## Our Community

out of a population 420,000.....

**26%** have a disability



**20%** are aged 65 or over



**4%** are BAME



## Our Staff

Out of 14,700 staff.....

**79%** are women



**2%** are LGBT+



**6%** are BAME



**2%** have a disability



## What do we want to achieve?



## What are we going to do?

Targeted interventions to improve access for protected groups including older, disabled, Trans\* and BAME patients, e.g. accessible information, engagement, reasonable adjustments.



Revise and improve the health board's Equality Impact Assessment process, involving staff and patients from protected groups



Work closely with service and corporate managers to embed Equality, responding and supporting them in Equality issues.



Embed legislative changes such as the Wellbeing of Future Generations Act, the Socio-Economic Duty

Ensure Equality, Diversity and Inclusion are fundamental to Workforce & OD initiatives including Values and Behaviour, Employee Experience and Just Culture.



Continually review gender pay and develop an action plan.



Review, develop and commission equality training for staff.



New staff networks for Disabled and BAME staff network to develop and implement a new Race Equality plan and Disability action plan. Extend to other staff groups.

Improving our recording and use of Patient and staff Equality data and review and update our priorities accordingly.



Work with our LGBT network and Stonewall's Diversity Champions scheme make CTM an LGBT friendly place to work

