



Annual Equality, Diversity and Inclusion Report 2020-2021

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INTRODUCTION

The period of time covered by this report has been extremely challenging for our staff, their families and for our patients. When our last annual report was published we were at the start of the Coronavirus pandemic and 12 months on the importance of equality, diversity and inclusion for our staff and in the way we deliver care has never been more clear.

The pandemic has thrown into sharp relief the impact of the health inequalities experienced by ethnic minority communities and patients and the devastating impact that COVID-19 has had as a result. We have also seen the impact on older members of our community and those with disabilities and this has been replicated within our workforce.

Keeping our staff and patients from diverse backgrounds safe during this difficult period has been our key priority and listening to the experiences and concerns of our staff has never been of more importance.

In addition, the world saw the shocking death of George Floyd and whilst the response to this awful incident gave hope, the messages from the Black Lives Matter movement remain a sharp reminder to all of us who have power and influence that we need to use that effectively to tackle racism and discrimination.

The pandemic has also impacted on our equality, diversity and inclusion work, making engagement and some of the other activities we would normally celebrate in our annual report much more difficult to deliver. However, this report documents our progress against the requirements of the Equality Act 2010 and Public Sector Equality Duty. The mandatory gender pay gap report, Workforce Race Equality Standard and Workforce Disability Equality Standard are also featured.

We continue to work with partners across the region and nationally in collaboration on activities and to share best practice about inclusion. We work proactively to be visible as an employer of choice across all our communities. We strive to reduce the health inequalities faced by our most vulnerable patients across the North West.

The events of the last year have given us pause for thought as an employer and provider of patient care. They have helped us to challenge ourselves to be more ambitious. We have worked hard to support the development of networks and our Patient and Public Panel, to ensure that the voices of our staff and patients can be heard, supporting us to improve. We have appointed Executive Champions from our Directors to act as allies, supporting our networks and staff and we have refocused on our priorities and commitment to improve.

As this pandemic subsides, we hope to emerge as a more resilient, more compassionate and considerate organisation for all our staff and patients and continue to keep diversity and inclusion as a vital aspect of each step forward.

LISA WARD

Director of People

SERVICE INFORMATION

North West Ambulance Service NHS Trust (NWAS) serves more than seven million people across approximately 5,400 square miles – the communities of Cumbria, Lancashire, Greater Manchester, Merseyside, Cheshire and a small part of Derbyshire (Glossop).

Our vision is to be the best ambulance service in the UK, delivering the right care, at the right time, in the right place; every time for patients accessing our urgent and emergency care (999) service, non-emergency patient transport service (PTS) and NHS 111 service.

Achieving this vision will result in the highest standards of safe, effective and patient-centred care, delivered in the most appropriate setting and with an appropriate workforce, resources and infrastructure.

Our values and their supporting behaviours form the foundation of the organisation; creating the right culture and conditions for patients to receive the right care. Our values form the foundation of and drive the whole organisation, ensuring we lead by example and create the right culture and conditions for patients to receive safe care every time.



We employ around 6,600 staff and are supported by over 1,000 volunteers as members of our patient and public panel, volunteer car driver network and community first responder network.

Population health and life expectancy in the North West is generally poorer than the rest of the country, with higher rates of deprivation, alcohol use, smoking related illnesses, cardiovascular and respiratory diseases. This information influences our strategy and priority areas of work.

Our services:

Urgent and Emergency Care

Our 999 emergency service responds to over 1.1 million emergency incidents each year; with a highly skilled workforce providing the best possible pre-hospital care to patients in remote-rural and urban environments.

Emergency responses are measured through the national Ambulance Response Programme (ARP), which allows for early recognition of life-threatening conditions and ensures patients are responded to in a timeframe suitable for their clinical need.

Demand for the emergency service increases each year, but the number of immediately life-threatening cases remains at approximately 10 percent of incidents. We collaborate with healthcare partners to develop a range of opportunities to treat more patients by telephone,

at scene and in community settings to help to reduce unnecessary transport to hospital - a better outcome for patients and the NHS system.

Underpinning the service is a renowned clinical leadership and supervision structure, enabling career, skills and educational progression for clinicians up to the level of chief consultant paramedic.

Resilience

The Resilience team is responsible for the development of effective emergency and contingency plans to mitigate and respond to risks and hazards. This work is often undertaken alongside multi-agency partners, such as the fire and rescue service.

Two of the country's Hazardous Area Response Teams (HART) form part of our Resilience department. HART is made up of specially trained paramedics who attend incidents that have the potential to be more dangerous, those which require a more specialised set of skills, or incidents that are declared a major incident such as those involving chemicals, explosions, unsafe structures, heights, water, accessibility issues and so on.

Emergency Operations Centres

Our emergency operations centres handles approximately 1.6 million 999 calls every year from the public and healthcare professionals.

Emergency medical dispatchers (EMDs) are the first contact with the ambulance service for 999 callers. They use an internationally recognised system to ask questions about the patient's condition and provide helpful instructions, such as how to do CPR to assist a patient in cardiac arrest.

Based on the nature of the illness or injury, patients are prioritised to determine the type of response and the speed at which it will be provided.

Based within the EOC, our Clinical Hub is staffed by a range of clinicians such as paramedics, nurses, pharmacists, mental health practitioners and so on, who support staff on the road with clinical advice and decision making, and triage patients who call 999 or 111 to determine the best course of action.

EOCs also handle requests from healthcare professionals whose patients urgently need taking into hospital, or transferring from one hospital to another.

NHS 111

We provide the NHS 111 service in the North West for people who need medical help or advice, handling more than 1.6 million calls every year.

People who call 111 speak to a health advisor who asks a series of questions about the patient's health concern or condition to determine what clinical help they need and where to get it. When appropriate, these calls can be referred to a nurse or paramedic for assessment.

111 can help patients access the most appropriate care; which could form out of hours' doctors, pharmacies, community nurses, emergency dentists, walk-in centres, minor injuries units and emergency departments.

111.nhs.uk is available for patients online.

Patient Transport Service

We are the largest provider of non-emergency patient transport in the country, undertaking 1.6 million journeys annually. We currently provide patient transport services (PTS) in the counties of Cumbria, Lancashire, Greater Manchester and Merseyside – another provider operates within the Cheshire area.

PTS crews assist eligible patients in getting to and from healthcare appointments. The criteria for entitlement to transport is set nationally and depends on specific requirements, medical conditions and mobility.

Patient Transport Service crews play a vital role in health promotion and prevention by sharing health information and advice to patients, and raising concerns to other support services if necessary.

People We Serve

The area covered by the organisation makes it the second largest ambulance Trust in England. We provide services to a population of 7.5 million people across a geographical area of approximately 5,400 square miles. This region is punctuated by several cities and towns; other parts of the footprint are sparsely populated and rural with significant distances to hospitals.

The Trust footprint is split into three main areas – Cheshire and Merseyside; Greater Manchester; Cumbria and Lancashire. Strategic capacity and support services are led centrally from the Trust Headquarters in Bolton.

Vision and priorities

Our vision is to be the best ambulance service in the UK, providing the right care, at the right time, in the right place; every time.

Our priorities

Urgent and emergency care (integrated care): Increasing service integration and leading improvements across the healthcare system in the North West.

Quality (right care): Delivering appropriate care which is safe, effective and patient-centred for each individual.

Digital: Radically improving how we meet the needs of patients and staff every time they interact with our digital services.

Business and commercial development: Developing skills and capability to explore business opportunities for current and new viable contracts, services or products.

Workforce: Engaging and empowering our leaders and staff to develop, adapt and embrace new ways of delivering the right care.

Stakeholder relationships: Building and strengthening relationships that enable us to achieve our vision.

Infrastructure: Reviewing our estates and fleet to reflect the needs of the future service model.

Environment: Committing to reduce emissions by embracing new technology including electric vehicles.

OUR STRATEGY AT A GLANCE

Our vision is to be the best ambulance service in the UK by delivering the right care, at the right time, in the right place; every time.

Values:



WORKING TOGETHER.

We work together to understand and value every role in achieving our shared purpose. We live and breathe inclusivity, everyone matters.



BEING AT OUR BEST.

We challenge ourselves to be the best we can be. We are curious and push boundaries to improve everything we do.



MAKING A DIFFERENCE.

We make a difference through doing the right thing by our staff, patients, partners and communities. We act with compassion and kindness.

Priorities:



Urgent and Emergency Care

Increasing service integration and leading improvements across the healthcare system in the North West.



Quality

Delivering appropriate care, which is safe, effective and patient centered for each individual.



Digital

Radically improving how we meet the needs of patients and staff every time they interact with our digital services.



Business and Commercial Development

Developing skills and capability to explore business opportunities for current and new viable contracts, services or products.



Workforce

Engaging and empowering our leaders and staff to develop, adapt and embrace new ways of delivering the right care.



Stakeholder relationships

Building and strengthening relationships that enable us to achieve our vision.



Infrastructure

Reviewing our estates and fleet to reflect the needs of the future service model.



Environment

Committing to reduce emissions by embracing new technology including electric vehicles.

Supporting strategies:

Urgent and Emergency Care Strategy

Quality (Right Care) Strategy

Digital Strategy

Finance plan - long term financial model

Workforce Strategy

Communications and Engagement Strategy

Estates and Fleet Strategies

IMPROVING EQUALITY DIVERSITY & INCLUSION

Strategy

The Trust aims to ensure that patients are at the heart of what we do. The purpose of the Workforce Strategy is to set how we will develop, engage and empower our workforce to deliver our vision to be *‘The best ambulance service in the UK, by providing the right care, at the right time, in the right place every time’*.

The Workforce Strategy sets out our strategic workforce priorities and our approach to enabling the changes required in our workforce to support delivery of the Trust’s strategic objectives.

The work plan for 2020/21 was impacted by the pandemic, but in spite of this, work has continued to support the Workforce Strategy objectives and includes the following achievements:

- Further development of staff networks, including the launch of the Race Equality Network
- Improving levels of representation in the workforce from BAME communities and the experiences of ethnic minority staff within NWS
- Ensuring recruitment selection methods are inclusive through the development of a ED&I Recruitment Task and Finish Group
- Commencement of our first cohort of Paramedic Degree Apprentices.
- Risk assessments and support for our ethnic minority, disabled, pregnant and our older staff to help keep them safe during COVID.

This annual report will provide information about each of these areas of focus.

The General Equality Duty (GED)

The Equality Act 2010 places general duties on public sector bodies and requires them to have “due regard” to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act
- 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

The General Duty clearly identifies the need to embed equality, diversity and inclusion into decision making at both an organisational and individual level so that we can respond appropriately to the needs of individuals and work to minimise or remove disadvantages experienced by people as a result of their protected characteristic.

How we have met the General Equality Duty (GED) in 2020-2021

The following gives some highlights of the key areas of work which have contributed towards the requirements of the GED in 2020-2021.

Patient Engagement

Patient engagement is recognised nationally as a fundamental measure of quality healthcare provision. It is only through active listening, recording feedback and acting on patients’ insight that the Trust can respond and implement change to reflect patient needs. This has never been as important as during the past year – where everything has changed due to COVID-19 and the global pandemic.

Our Patient Engagement Team engages with and obtains feedback from our patients across all service areas, including our Paramedic Emergency Service (PES), Patient Transport Service (PTS), the NHS 111 Service and our Urgent Care Desk. Due to the pandemic, this year some of our methods of engaging have been adapted and changed so that we could continue engaging throughout but also so that we could proactively gain feedback in relation to our response to COVID-19. A significant 8,189 patients have provided us with feedback on our patient engagement surveys using a range of methods. See Figure 1 below.

Patient Engagement Survey - Survey Channels (01 Apr 2020 - 31 Mar 2021)		Completed Returns	% of Total
Patient Transport Service PE Survey *	(On-line)	8	0.1%
Patient Transport Service - Friends and Family Test (FFT)	(SMS Text)	3,025	36.9%
Patient Transport Service - Friends and Family Test (FFT)	(Post cards)	12	0.1%
Paramedic Emergency Service PE Survey	(On-line)	136	1.7%
Paramedic Emergency Service - Friends and Family Test (FFT) - (See and Treat)	(SMS Text)	1,205	14.7%
Paramedic Emergency Service - Friends and Family Test (FFT) - (See and Treat)	(Post cards)	24	0.3%
Urgent Care Service PE Survey *	(On-line)	2	0.0%
NHS 111 Service PE Survey	(Postal)	2,944	36.0%
NHS 111 First Service PE Survey	(Postal / On-line)	825	10.1%
Pandemic Patient Experience Survey **	(On-line)	8	0.1%
TOTAL		8,189	

Figure 1 - 2020 - 2021 PE Survey Channel Table (Please Note: All data as at 31 March 2021)

An extensive patient engagement programme was successfully completed during 2020/21. In addition, to our NHS 111 postal survey offer and FFT comment/postcards on vehicles, we continue to develop our digital offer by offering the opportunity to complete our patient surveys via sms text and online <https://www.nwas.nhs.uk/get-involved/share-your-experience/tell-us-how-we-did/>

Also, instead of our traditional face to face engagement that would normally take place with patient and community groups, we have been hosting and joining virtual engagement sessions via MS Teams and Zoom. Figure 2 below shows a summary of survey response feedback data including FFT by quarter.

2020 - 2021 Patient Engagement Surveys																				
Postal/On-line (01 April 2020 - 31 Mar 2021)																				
	Cared for appropriately with Dignity, Compassion and Respect (Strongly Agree/Agree)					Overall Satisfaction Received (Very Satisfied/Fairly Satisfied - Yes)					Overall Experience of Service (Very Good/Good)					Recommend Ambulance Service to Friends and Family (Very Good/Good)				
	Q1	Q2	Q3	Q4	YTD	Q1	Q2	Q3	Q4	YTD	Q1	Q2	Q3	Q4	YTD	Q1	Q2	Q3	Q4	YTD
Patient Transport Service *	No Data	100%	80.0%	No Data	87.5%	n/a	n/a	n/a	n/a	n/a	No Data	100%	80.0%	No Data	87.5%	n/a	n/a	n/a	n/a	n/a
Paramedic Emergency Service	No Data	89.1%	86.4%	91.7%	88.2%	n/a	n/a	n/a	n/a	n/a	No Data	91.3%	86.4%	91.7%	96.2%	n/a	n/a	n/a	n/a	n/a
Urgent Care Service *	No Data	100%	No Data	100%	100%	n/a	n/a	n/a	n/a	n/a	No Data	100%	No Data	100%	100%	n/a	n/a	n/a	n/a	n/a
NHS 111 Service	n/a	n/a	n/a	n/a	n/a	94.9%	95.2%	92.3%	94.2%	94.3%	n/a	n/a	n/a	n/a	n/a	94.5%	95.9%	91.6%	93.7%	94.2%
NHS 111 First Service	n/a	n/a	n/a	n/a	n/a	No Data	No Data	94.1%	96.6%	96.4%	No Data	No Data	91.7%	95.6%	95.2%	n/a	n/a	n/a	n/a	n/a

Figure 2 - Survey Response Feedback data by Quarter. NB: Introduction of NHS 111 First Service

Feedback received during 2020/21, shows a high regard for ambulance services and in particular the care and treatment provided by staff. A high 96.2% of PES patients found their overall experience of the service either good or very good with 88.80% stating that they were 'cared for appropriately with dignity, respect, kindness and compassion'. *"Dispatcher was very calm and reassuring and stayed on the phone to reassure me till the ambulance crew arrived. Ambulance crew were kind, caring and treated both my Grandma and me with such compassion whilst still doing their jobs."*(PES) *"Professional empathetic intelligent caring and listening would describe all staff perfectly. Dignity maintained at all times and paramedics really help to dignify me before leaving home thankfully."* (PES)

95.2% of NHS 111 First patients and 87.5% of PTS patients also found their overall experience of the respective services either good or very good with 87.5% of PTS patients stating that they were 'cared for appropriately with dignity, respect, kindness and compassion'. *"My transport had been arranged on my behalf by the SLBC. I was approximately 36 weeks pregnant, and I had just been told an hour prior to my journey that at 23 years old I had a blood clot in my brain. The ambulance crew were fantastic. I could not have asked for any more support or care. They actively engaged with me and helped me relax, something which was crucial to me given my partner wasn't allowed to travel with me (COVID restrictions)."* (PES) *"I rang for advice but following my answers to some question told I needed to go to A and E. Was really pleased when they said they could book me in to save time - a great help I'm 73."* (NHS 111 First) *"Call handler was great with my son who is uncomfortable on the phone."* (NHS 111 First)

Reporting

Board receive a monthly dashboard of FFT patient feedback results. Quarterly data on all patient engagement initiatives themes and feedback reports are shared with Quality and Performance Committee. The Patient and Public Panel members receive regular Trust briefings and a Panel newsletter. During the past year we have also introduced sending regular info bursts to our patient and community groups and our patient and public panel members. These have contained a wide range of information including public health messaging, Trust information and opportunities for support and engagement during the pandemic. Recommendations for service improvements are introduced via 111, PES and PTS learning processes respectively.

Patient stories continue to be a powerful tool to describe patients' experiences and any learning outcomes that have been achieved. These are presented bi-monthly to the Board of Directors, Quality Committee, to staff as part of their mandatory training, and are part of education and awareness campaigns. These have continued during the pandemic though there have been some challenges due to lockdown in sourcing and filming them and innovative ways of presenting have been used – such as using voiceovers to outline the story and filming them over MS Teams. The patient stories have included experiences related to maternity, laryngectomy patients and increased learning and understanding within the organisation of their needs and how we support vulnerable patients and their families whilst under COVID-19 restrictions. Increased development of filming skills within the communications and engagement team has supported in-house production of patient stories.

Public and Community Engagement

Whilst patient surveys provide us with a real insight into the care and treatment that patients have received, another method we use to gain qualitative feedback is by engagement with community and patient groups within our region – due to the pandemic this has taken place virtually this year. There were plans to hold some large scale community events but these were postponed due to the pandemic and pressures on the service.

However we did engage virtually with a number of patient and community groups on a number of topics, one was to talk about our response to COVID-19 and also to help understand how we could support our groups during further waves of the pandemic. Another focus for engagement was the introduction of NHS111 first and talking to groups about how they could access that service and the other services that NWAS provide.

The Equality Act 2010 introduced the term "protected characteristics" to refer to groups that are protected under the Act. These are cited as: age, disability, gender reassignment, race, religion or belief, sex, sexual orientation, marriage and civil partnership, and pregnancy and maternity. Figure 3 below shows protected characteristic groups' engagement in 2020/21.

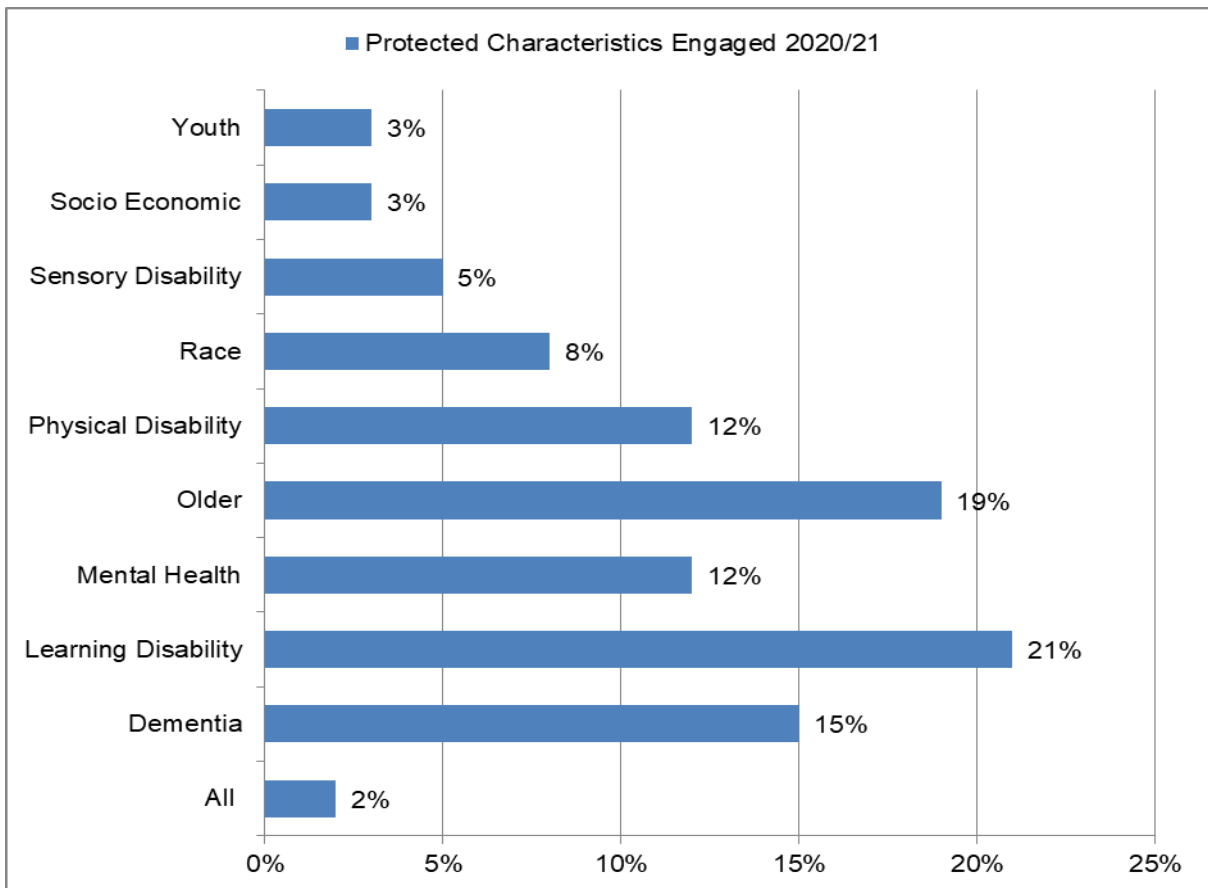


Figure 3 - Protected characteristic groups engaged with during 2020/21

Patient and Public Panel

Our Patient and Public Panel (PPP) was established in September 2019 to give patients/the public a voice and the chance to have their views acted upon. The panel is made up of representatives from local communities, interest groups, the voluntary sector and partner organisations, and offers meaningful opportunities to influence decisions and improvements in our emergency, patient transport and 111 services.

Despite the challenges from COVID-19, our PPP has continued to recruit new members and actively engage throughout the past 12 months via virtual platforms meaning we now have 143 Patient and Public Panel members fully inducted, with most already involved in the work of the Trust. We have hit our original target of 125 for the PPP as well as doubling members from the end of March 2020 to now which is a great success for the Trust.

The PPP has an infrastructure to enable patients/the public to become involved at a level that suits them however at present, all levels are engaging virtually until further notice:

- ‘Consult’ is virtual, making the most of digital channels to interact with members who can get involved whenever or wherever they choose
- ‘Co-produce’ panel members work together on short-term projects using co-production techniques
- ‘Influence’ members take an ongoing, active role in high-level meetings to enhance decision making and discussions

A breakdown of panel member's involvement by level can be found at figure 4.

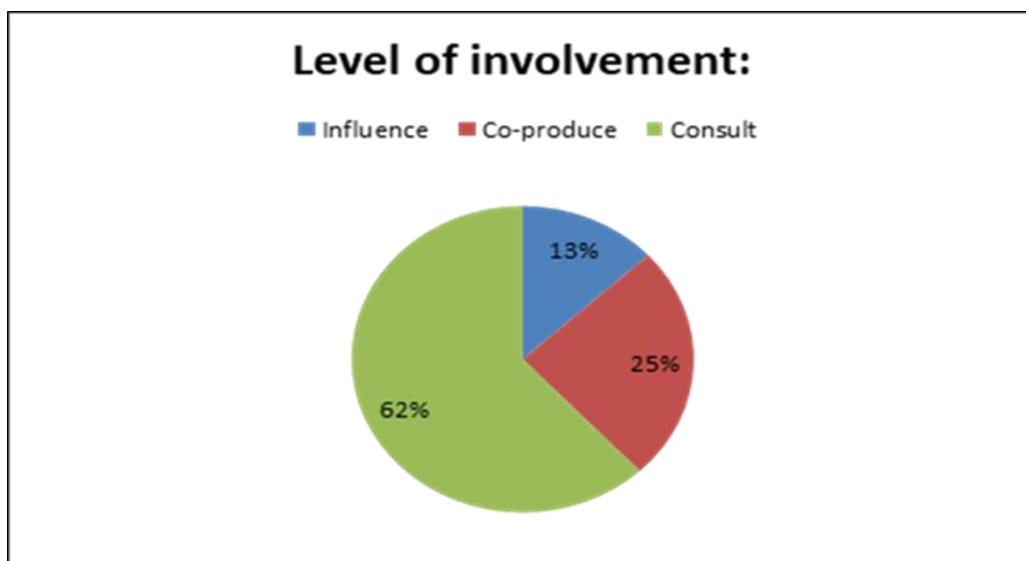


Figure 4: Breakdown of panel member's involvement by level

The demographics of Patient and Public Panel members continue to show that membership from the Cheshire and Lancashire regions is currently slightly below the target representation compared to the other areas we cover across the North West. See figure 5.

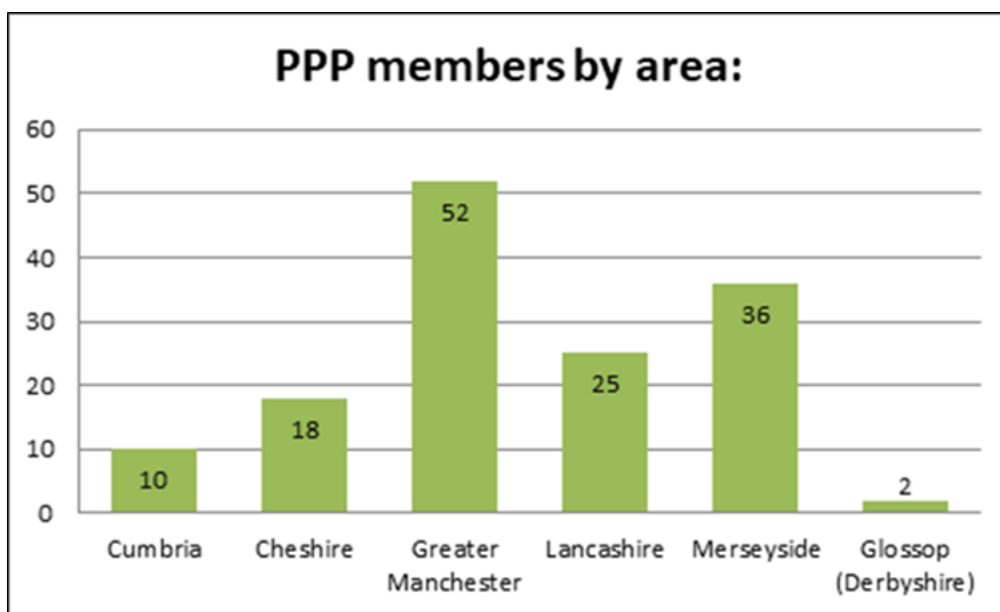


Figure 5: PPP members by area

Panel membership for those declaring a disability has been over and above the initial target, which is positive.

We have successfully reached our target for members in the younger age bracket (16-24) compared to last years' update as shown at figure 6. However, we recognise more work needs to be done to engage with young people across the North West, linking into colleagues who lead on community engagement.

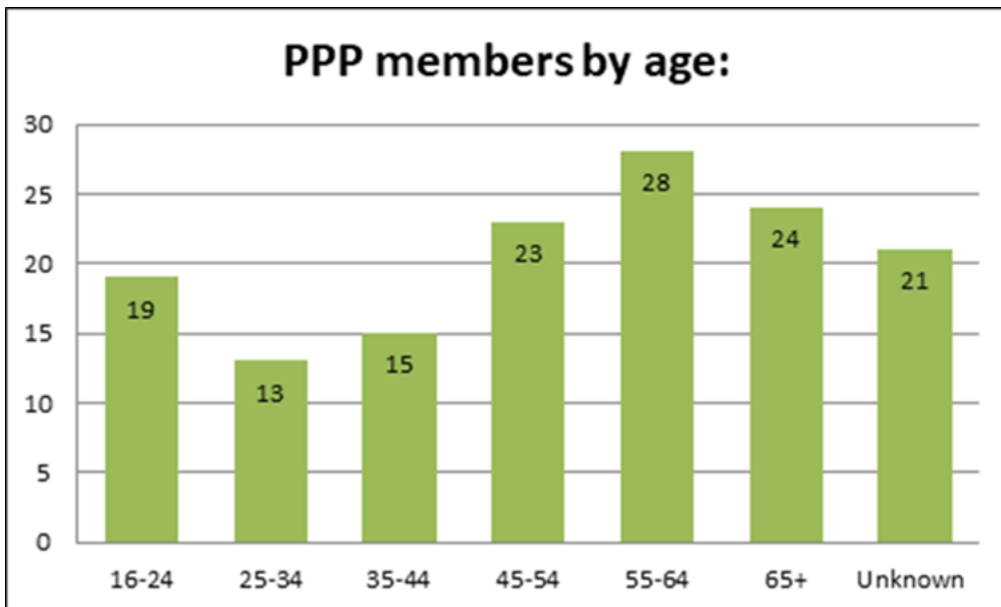


Figure 6: PPP members by age

As shown in figure 7, we are underrepresented by members from our ethnic minority groups at only 8.4% representation. Enhancement of this data has been reflected in the PPP work plan for future recruitment.

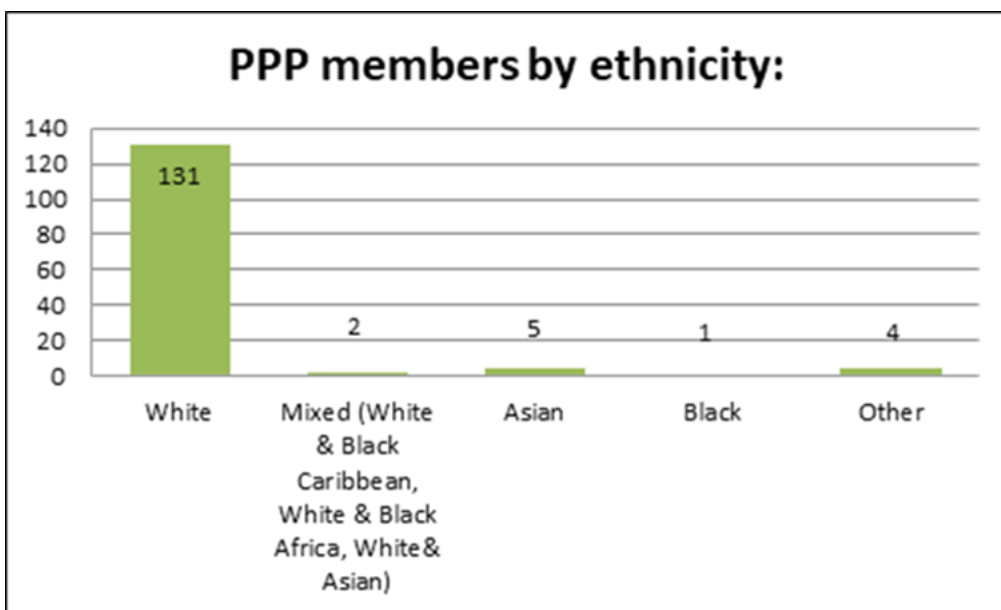


Figure 7: PPP members by ethnicity

From April 2020 to March 2021, PPP members have been invited to get involved in 44 opportunities with staff across the Trust. The PPP have been able to get involved in regular high level meetings (area learning forums, mental health work streams and complaints review panels), a mystery shopper activity with PTS, regular information and development sessions. They have also had the opportunity to provide feedback on key documents and publications.

If staff would like PPP involvement we ask them to complete a PPP pro-forma to help us understand what is required from a Patient and Public Panel member. This can be found online via our Green Room or a hard copy can be sent on request.

Engagement Activities

Patient and Community engagement activities during 2020/21 have enabled us to:

- Receive advice and feedback from a range of our hard to reach and vulnerable patient groups on how to improve access to ambulance services.
- Better understand how we can support our vulnerable patient groups during the pandemic.
- Gain insight into how the pandemic has highlighted health inequalities for some communities within our region.
- Stay in contact with and keep our patient, public and community groups informed with information relevant to NWAS and the pandemic through the introduction of regular info bursts.
- Increase awareness with a range of our communities on our ambulance service provision
- Provide reassurance for our patient groups, the general public and communities that we take community engagement seriously even though there have been some barriers to engagement during the last twelve months and that all feedback received from our patient and community engagement activities is valued and where required will be acted upon.
- Promote partnership working with many of our hard to engage and vulnerable groups including with CFR volunteering opportunities and our Patient and Public Panel (PPP) membership.

Examples of some of the feedback and questions asked during feedback include:

- *“We don’t know for sure if staff have taken precautions e.g. hand washing, so it can be worrying putting your Trust into staff being safe and not to put you at risk.”* (Patient group engagement)
- *“Many people going through a mental health crisis may not ring for an ambulance; they will just turn up at ED as they want immediate help. We need to understand why some people self-present at ED. What is coming through in the calls we receive and who is showing up in person? This is important to understand.”* (Mental Health forum engagement)
- *“Do you prioritise people with a learning disability, would they still have to wait in ED?”* (Learning Disability community group)
- *“What protocols do you have in place for autistic patients?”* (Autistic Adult forum)
- *“There is anecdotally a mistrust in the ambulance service in some ethnic groups as there is a belief that if the ambulance takes you to hospital, you may not return home again.”* (Caribbean and African Health network engagement)

Patient and Community Engagement Aims

The Trust’s patient and community engagement aims (as set out in the Patient Engagement Implementation Plan 20/21) during 2020/21 included:

1. To engage and educate a range of patient, public and community groups, on what to expect from and how to access ambulance services.
2. To work in partnership with our patient, public and community groups, stakeholders and patient and public panel (PPP) members to design services which meet their needs.
3. To capture and share changes which have been made as a result of patient, public and community group feedback.
4. To enhance patient, public and community groups access to ambulance employment opportunities.
5. To ensure that engagement is embedded throughout the organisation and that priority messages are shared with our patients, public and community groups.

Engagement highlights and activities delivered during 2020/21 to support these aims include:

- Engagement activities with diverse communities as detailed in the Patient Engagement and PPP Activity Plan 2020/2021 (Appendix1). The plan identifies a minimum 109 virtual engagement events that have been attended by the Trust as either principal speakers, advisory or facilitation. Virtual community patient and public community engagement events include: Preston Health Mela, Healthwatch, Warrington Speak Up Learning Disability Group, Caribbean and African Health Network, Dementia Café and CCG Conferences. Our engagement has looked slightly different to previous years as many of the 'face to face' high footfall events that we would usually attend such as fresher's fairs, Disability Awareness Days and PRIDE were cancelled due to the pandemic. Wherever possible and if restrictions allow, we will attend these events in 2021.
- A Trust 5 year Community Engagement Guidance Framework 2020/25 was agreed in 2020 to ensure attendance at high footfall community events remains centrally logged with the communications and PE team. Consistency of information to be relayed at the events is shared with all staff attending along with an opportunity to receive good practice feedback on our attendance. However this also remains under constant review on how we can meet our aims in line with the pandemic and restrictions on meeting face to face.

Feedback, Learning and Service Improvements

An analysis of the feedback received from patients provides us with focus areas for our annual work programme, themes for learning and the opportunity to make service improvements. Activities during 2020/21 include:

- Feedback from our deaf community has highlighted the increased barriers to communication due to our staff wearing PPE during COVID-19. Ways in which we have looked at breaking down those barriers include good practice consideration to wearing PPE with clear facial screens and also the procurement of deaf awareness training for 50 staff members. We also now ensure that any videos that are shown on social media are subtitled and for the first time this year our Virtual AGM was signed by a BSL interpreter. At the beginning of the pandemic we also shared co-produced information on how our

emergency service could be accessed using Emergency SMS and how NHS111 could be accessed using Interpreter Now.

- Providing reassurance to our patient, public and community groups throughout the pandemic regarding resources, availability and how we undertaken our response to the pandemic. Also keeping them informed in areas that may help benefit their health and well-being.
- Following feedback that despite using Teams for most of our engagement, Zoom is much more accessible for those with additional accessibility needs, we purchased a zoom license to undertake engagement using Zoom.
- We have begun co-production work on a new pictorial communication handbook which will be co-produced by the PPP, staff and patient and community groups and will be more representative of the communities that we serve.
- Following feedback that we need to make our publications more accessible, PPP information is now always provided in an accessible format for our visually impaired members and those who require their information in high contrast. We also have also invested in a photo symbols subscription so we will be able to produce more easy read information in the future.

Recruitment

Further work has continued to ensure recruitment and selection methods are inclusive, this is an ongoing process and aims to be without unnecessary barriers for candidates to negotiate. Actions have been taken to improve the diversity of panels, as well as consistent guidance on equality issues from the HR Hub.

Along with staff side leads, the guidance relating to the job evaluation process had been reviewed in the previous year, ensuring job description and person specification documentation is accurate and inclusive.

Monitoring take place on a quarterly basis with production of quarterly recruitment reports for WRES and WDES meetings, with comparative data for previous quarters. This was initiated from a request at the WRES meeting held in April 2020 and the Trust aims to be able to compare these reports to the last 12 months come April 2021. This enables the Trust to keep a focus on representation in recruitment and to identify actions for improvement.

NWAS has attended a range of different events to showcase the diverse range of frontline and support roles available to those looking for a career within the ambulance service. As a result of the pandemic the majority of these events have now been moved to online events. The events we attend are selected to ensure diverse and underrepresented groups are made aware of opportunities, some of which are detailed in the Community Engagement and Widening Participation section below.

The Paramedic Pre-Degree Programme which aimed to support under-represented groups into a Paramedic career, was postponed at the outset of the pandemic due to

being unable to carry out community engagement at a ground level. This will be reviewed for 2021/2022.

Positive action messages remain on Trust adverts. NWAS is a Disability Confident Employer giving reassurance to candidates with disabilities about the level of support they can expect as candidates and onwards as employees of the Trust. Logos demonstrating commitment to equality are also visible on job adverts including Disability Confident, the enei Silver Tide Mark, the Employer Gold Recognition award and Veteran Aware.

The Trust has set up a Recruitment Task and Finish Group in response to the NHS People Plan which seeks for Trusts to '*overhaul recruitment and promotion practices to make sure that their workforce reflects the diversity of their community, regional and national labour markets*'. The group has representatives from each service line along with the Race Equality Network Chairs and seeks to review the end to end recruitment and selection processes through the agreement of diversity targets, reviewing the attraction material for candidates, addressing bias in our systems and processes along with a review of our recruitment and selection training.

Youth Engagement, placements and other programmes of work

The Trust usually provides placements for Healthcare Cadets across Greater Manchester, Cheshire and Mersey and Cumbria and Lancashire, receiving placement opportunities from January- May to assist them in gaining vital experience of the ambulance service environment to make informed career choices for future career aspirations. Unfortunately these cadets could only receive experience from January until March 2020 in the PTS environment due to the pandemic. These individuals often progress on to university in Health care degrees.

The Trust has continued to hold the Fair Train Gold award. Fair Train's Work Experience Quality Standard is not just a highly respected accreditation; it is also a rigorously tested and widely proven step-by-step guide to making the specific work experience valuable, fulfilling, rewarding and the best possible uses of resources. The Work Experience Quality Standard is a national accreditation which recognises those organisations offering high quality work experience opportunities to their learners, and managing risk effectively. It also acts as a framework for development to help organisations to plan, run and evaluate high quality work experience programmes. This Work experience Quality Standard is currently being reviewed with a view of a national quality standard being created, work which NWAS is currently involved within.

With the difficulties seen during the pandemic NWAS has unfortunately struggled to engage with young individuals face to face and provide the usual opportunities. We have however been able to support individuals in a virtual realm -providing many online careers events, online virtual mentorship and collaborating with HEE and career hubs to undertake targeted youth development work. Please see Appendix 1 for an outline of the community engagement activity over 2020/21.

Community Engagement and Widening Participation

As well as our approach to patient and public engagement, the Trust also attends a range of community events to promote recruitment and development opportunities to support our approach to Widening Participation in employment and training.

Due to the pandemic our usual attendance at these face to face events has been significantly affected and many had to be cancelled. For the first few months of the year as a Trust we struggled to engage with our communities, until the virtual platforms and events went live – this has seen us reach large numbers of our community again to offer the support and guidance needed for their career aspirations.

Through our strategy to increase the diversity of our workforce, the Trust has attended a number of events to promote NWAS as an employer of choice. Advice, information and guidance is offered by staff so communities and individuals know where we advertise and about the range of roles, including our apprenticeship positions. Through attending the events, (which through the pandemic have been on virtual platforms) our staff can spend time discussing any barriers or particular needs of individuals and groups to enable future career aspiration to be attained.

Individuals have also engaged with bespoke 1:1 support throughout the pandemic, engaging with opportunities for information advice and guidance, next steps information and also application support and interview skills.

Priority is also given to events where there is potentially a diverse group of attendees or attendance from a group that is underrepresented in the workforce currently. Any schools or other venues which we are unable to visit can be informed about a high footfall event in the local areas we are scheduled to attend, or we can also share information with them electronically and refer them to social media, as appropriate.

The list of schools and events supported where jobs and careers have been promoted and numbers of 1:1 engagement can be found on Appendix 2.

Partnership working with the Armed Forces

Supporting the Armed Forces Community, both internally and externally is an important area of focus and commitment for the Trust, and collaboration and sharing good practice is a significant element of this work. Although not a protected characteristic, veterans can struggle to transition to civilian life with the consequent impact on mental health, so our commitment works hand in hand with our equalities work.

The Trust has developed a good working relationship with the Reserve Forces' and Cadets' Association and maintains close contact with the Regional Employer Engagement Director for the North West through regular meetings.

Discussions with NHS Trusts across the UK have been taking place with regards sharing information about the strands of work across the Trust and how it has been

implemented, as well as supporting other Trusts to achieve the next level of the Employer Recognition Scheme, for example, as a member of the Gold Alumni, sharing good practice with the Countess of Chester NHS Trust to support application for the Employer Recognition Scheme Silver award and with the Welsh Ambulance Service to achieve the Gold award. In October 2020 the Trust presented to the Lancashire Councils' Armed Forces Champions Forum with regards setting up the Trust's Armed Forces Network and in March 2021 presented "Embedding support for the Armed Forces from Board to Ward" at the NHS and the Armed Forces Conference.

The Trust also shares good practice with NHS Trusts in the North West through virtual connect sessions with Step into Health and regional NHS forums, for example, the Merseyside and Cheshire Military Veterans and Armed Forces Personnel Task and Finish Group. In addition, representatives of the Trust attend the Covenant Partnership Hub meetings in Lancashire, Greater Manchester and Cheshire.

At a patient level, our PES team continues to work with the Third Medical Regiment to offer honorary contracts to military paramedics in Cumbria and Lancashire. During the pandemic, the military paramedics have worked side by side with the Trust's paramedics and EMTs to provide emergency care as part of the frontline.

In February and March 2021, following application for support, the military has been working with paramedic emergency service and patient transport service crews, providing assistance to the wider healthcare system at a time of very high demand and supporting patients across the region.

Recruitment of the Armed Forces community and working with partner organisations to achieve this is high on the Trust's agenda. Due to the pandemic, Armed Forces focused careers fairs were postponed, however, work has been ongoing to promote career opportunities at the Trust through sharing information with partner organisations and disseminating email bulletins to service leavers and veterans. The Widening Access Team and Positive Action Officer have supported two bespoke live chats organised in partnership with the Careers Transition Partnership and a collaborative online event with NHS Employers' Step Into Health.

One to one support with regards the recruitment process is offered to service leavers transitioning into civilian employment and veterans, including support on career pathways, writing effective applications and interview skills. 67 service leavers and veterans have received this level of support via email, telephone and virtual face to face support. The Trust also works with NHS Employers' Step into Health, which facilitates career transition from the military into civilian employment. 52 service leavers and veterans have been referred by the Step Into Health candidate monitoring system and have received information, advice and guidance with regards careers at the Trust. In addition, service leavers and veterans are also referred by partner organisations including College of Military Veterans and Walking with the Wounded.

To demonstrate support to the Armed Forces community, in February 2021 the Trust launched the Guaranteed Interview Scheme to veterans and currently serving reservists and cadet force adult volunteers. If candidates can demonstrate the minimum essential criteria, the scheme guarantees invitation to the initial assessment (i.e. interview, psychometric assessment, driving assessment). Guidance for managers with regards the scheme has also been produced. In order to enable monitoring of members of the Armed Forces community applying for roles, a tick box has been added to application forms to enable applicants to inform that they are a member of the Armed Forces community, and quarterly monitoring reports are now being produced and shared across the recruitment teams.

The Trust continues support of its Armed Forces community through the Armed Forces Network (for more information please refer to the Staff Networks and Forums section). A highlight for the Network was the celebration of Armed Forces Week in June 2020. The week provided much deserved recognition of the wider Armed Forces community, including veterans, reservists, service families and cadet force adult volunteers.

An Armed Forces Action Group has been established to support cross-team collaboration comprising representation from teams across the Trust meeting quarterly to discuss all of the work being conducted and how teams can work together.

In addition, in December 2020 the Trust appointed an Executive Sponsor, Angela Wetton, who will provide visible senior support and advocacy to support all work with the Armed Forces, and the Equality, Diversity and Inclusion Policy was updated in January 2021 to explicitly reflect the support the Trust offers to members of the forces, specifically the addition of cadet force adult volunteers who were not included previously.

A key achievement for the Trust is becoming the first ambulance service in the UK to be awarded Veteran Aware accreditation from the Veterans Covenant Healthcare Alliance (VCHA). This demonstrates close working with the Armed Forces community and partnership working and recognises that we have demonstrated that the Trust supports the Armed Forces community as an employer, that we ensure that veterans, reservists, cadet force adult volunteers and other members of the community amongst our workforce are looked after, and that we have good links with other local services and service charities. The VCHA has invited the Trust to form alliances with other NHS Trusts in supporting them to achieve Veteran Aware status, for example, linking with the Armed Forces lead at London Ambulance Service and sharing good practice to support their Veteran Aware accreditation application.

A further achievement was the honour bestowed to Dominic Gething, Senior Paramedic Team Leader, Reservist and Network member, to represent ambulance services across the UK at the official ceremony at the Cenotaph in London on Remembrance Sunday in November 2020. The Trust also worked collaboratively with North West Army HQ and Ian Jolley, veteran, presented at Lancashire Remembrance Service via Radio Lancashire with a focus on the Trust's response to

the impact of COVID-19-19. In March 2021, Matt House, Consultant Paramedic, Reservist and Network member, was appointed to the role of Defence Service Advisor for Paramedics whereby he will be senior advisor to the Ministry of Defence on the paramedic workforce across the three services and will be able to further support the Network in this role.

An overview of all work carried out by the Trust can be found at Appendix 3

Staff Training

Equality, Diversity and Human Rights is embedded in all induction training in the Trust for new starters. Furthermore all staff are required to complete refresher training on an annual basis covering equality, diversity and human rights as part of their mandatory training. For frontline staff this training is also embedded through scenarios which are discussed and debated in a face to face group to test people's learning.

In addition, frontline staff will also receive training on differing aspects of care which may vary from year to year, for example dementia or learning disabilities. This training helps to equip staff to deliver the right care to patients, taking into account their needs. As well as all managers completing their mandatory training on an annual basis, they are also able to access a suite of training sessions to support their role and EDHR is embedded within this training.

HR Masterclass sessions are available for all managers and these are run on a quarterly cycle throughout the year. Existing managers can access these sessions as required and new managers are expected to attend these sessions as part of their induction during their first year in post so that we can ensure that they are equipped to support their staff effectively, taking account of their individual needs.

Building EDI Cultural Competence at NWAS

EDI education, learning and development is embedded into the employee life cycle at NWAS. At point of entry into a new role, new starters are introduced to a range of interactions with the EDI learning portfolio including navigation to the mandatory training module for EDI (annually refreshed) and a wide spectrum of self-directed learning resources developed and managed by the Trust's Staff Networks.

During their employment journey with NWAS, staff are further developed in areas of EDI through specialist thematic learning interventions designed to improve and enhance cultural competence: the portfolio includes access to the EDI programmes including 'Beyond Bias' that explores the impact of personal bias on staff experience; the recruitment masterclass that examines the impact of bias on inclusive recruitment practice; and bespoke learning programmes for specific workforce communities to drive anti-discriminatory practice in service design, development and delivery. This portfolio is being continually enhanced with immediate plans in 2020/21 to launch our refreshed values and behaviours and to support embedding of these through values based education / training and toolkit utilisation that guides

staff in interpreting the Dignity at Work policy in line with the principles of the Treat Me Right campaign.

As an NWS employee settles into working life, an extensive leadership and management development suite of learning, development and training is made available to all staff. At the heart of this offer, is the 'Be Think Do' leadership framework which continues to be reviewed and revised as appropriate, seeking to embed inclusive behaviours expected of our managers and leaders into the mainstream. The NWS leadership model anchors staff to the inclusion agenda and acts as an enabler and conduit for managers to respond to the needs of staff from underrepresented groups in appraisals, health and wellbeing conversations and in the management of performance including reward and recognition, progression and promotion and talent management.

In addition to the above, staff are offered coaching, bespoke organisational development support and are signposted to highly reputable offers from across the health and care system in partnership with partnering agencies like the NHS North West Leadership Academy that offers an inroad to specialist EDI programmes including Stepping Up and Ready Now for career progression. As such, NWS has been successful in engaging with and piloting a series of EDI centric learning innovations including the NHS Reciprocal Mentoring Programme hosted by the NHS National Academy which will be launched in 2021.

It is the ambition of NWS that the above staff development portfolio will facilitate and drive the necessary cultural competence to position NWS as an employer of choice for all underrepresented groups, across all the protected characteristics.

Staff Networks and Forums

The COVID-19 pandemic initially had an impact upon staff networks and forums however due to the level of virtual support NWS provides, these have been able to continue their development through virtual media and to further enable staff with particular characteristics to share their experience and to provide a collective and influential voice on behalf of staff. The forums and networks allow the organisation and colleagues to learn, support, and ultimately improve the working culture for everyone. There are clear links to the improved patient care we can provide when we understand, recognise and support our differences.

Within the NHS People Plan there was an intention that by December 2021 all NHS organisations should have reviewed their governance arrangements to ensure that staff networks are able to contribute to and inform decision-making processes and executive champions have been assigned to all networks and forums. To this end the Trust reviewed its infrastructure support for networks during 2020, providing guaranteed release for core members, an allocated budget and identifying champions from the Executive Team who can support networks to achieve their goals. The Trust has worked hard to deliver this aim.

The NWS LGBT Network has continued to develop with regular meetings and has continued to raise its profile through virtual activities. Over the last 12 months,

Committee members have continued to meet on a quarterly basis via MS Teams. Visibility of the Network has been evidenced through Trust executives participating in the Network meetings and listening to staff experiences. In addition, Lisa Ward, Director of People, has now been appointed to the role of Executive Champion for the Network.

Key achievements include celebrating Pride via Trust media with a virtual Manchester Pride video in August 2020 showcasing participation by LGBT members and Trust-wide staff; celebrations of LGBT History Month during February 2021 through talking about and raising awareness of LGBT icons; crowd funding to raise monies to adopt animals to support Chester Zoo; development of training programmes to support the continuing professional development of staff in LGBT issues and work on combatting violence and aggression. Communication has also been improved with focus on the impact of COVID-19 and raising awareness of tackling health inequalities. Increased awareness of the wider trans communities has taken place and network members were heavily involved in the review of the Policy for Supporting Trans and Non-Binary Staff, which was agreed in March 2021.

The Disability Forum was paused at the beginning of the pandemic, however, since November 2020, four meetings have been held with open discussions sharing experiences of staff during the pandemic and raising any issues faced, particularly with regard to members who have been shielding. Throughout this period, members of the Forum have been invited to participate in the pilot of the Work and Wellbeing Passport. In addition, information has been shared with Forum members with regards webinars on disability throughout Disability History Month, and the Network supported an awareness raising initiative for the International Day of People with Disabilities via case studies and articles. Carolyn Wood, Director of Finance, is now the Executive Champion for the Disability Forum. Representatives of the Disability Forum are now invited to attend WDES meetings and the National Ambulance Disability Forum, alongside the representative from Corporate HR.

The Race Equality Forum has gone from strength to strength and in January 2021 formalised to become the Race Equality Network holding a virtual launch which welcomed all staff members from sectors across the Trust. Salman Desai, Director of Strategy and Planning, and Ged Blezard, Director of Operations, have been appointed as the Executive Champions of the Race Equality Network.

During the first months of the pandemic monthly meetings took place to discuss the impact of COVID-19 on BAME staff and NWS' responsibilities, as a result of which a communications and engagement plan (during and post-COVID-19) was developed. The National Ambulance BME Network sent correspondence and offered webinars with regard to supporting BAME colleagues, this was reinforced by support from the Trust's Executive Committee. The emerging network also provided support to the command cell in reviewing the potential impact of decisions on ethnic minority staff and patients.

Risk assessments to determine the impact of the COVID-19 virus on BAME employees took place during the first quarter followed by a full review of the impact

of the virus clarifying how employees have been affected and what support was required from the Trust. Members of the Executive Committee have also provided support through attendance at Forum/Network meetings and responding at Q&A sessions. The Trust also supported Black History month with staff sharing their experiences to raise awareness of racism and celebrate diversity.

Following formalisation, the Race Equality Network assigned Committee roles - Asha Blake and Wesley Proverbs were appointed the role of Co-Chairs supported by a core group of six members representing communications, community engagement, education and awareness, recruitment and careers, staff support, events and communication. Terms of Reference have also been developed. A representative from the Race Equality Network now attends WRES meetings, the Violence and Aggression group and the ED&I Recruitment Task and Finish Group. The Trust's intranet pages have also been updated to reflect the evolution of the Network. The Network has developed an action plan that it will be supported to deliver during 2021/22.

The Religion and Belief Forum was launched in June 2020 via MS Teams and two further Forums took place in September 2020 and March 2021. The Religion and Belief Forum provides a safe space to talk about religion and belief. The forum raises awareness and understanding of different faiths, beliefs and cultures, and works towards connecting and supporting staff with an aim to share good practice and to provide interfaith advice, guidance and information. The forum is open to staff of all religions and beliefs and none. To date, key themes for discussion have been chaplaincy and supporting individualised care; the religious and cultural needs of Muslim patients, and how managers can support their Muslim team members; and the Jewish faith and supporting Jewish patients.

The NWAS Armed Forces Network briefly paused at the beginning of pandemic, however, has reconvened for quarterly meetings since June 2020. Key achievements include working with the Communications team to deliver a social media campaign during Armed Forces Week including case studies, articles, photos, and short videos to raise awareness of the Reserve and Cadet Forces within NWAS; and members of the Network organising and raising the *Support our Forces* flag at hubs across the Trust footprint for Reserves Day. The Network also supported services across the Trust on Remembrance Day. Angela Wetton, Director of Corporate Affairs, has been appointed as Executive Sponsor for Armed Forces work across the Trust.

Policy Development

All new and existing policies, procedures and guidance is developed in partnership with Staff Side and management colleagues through our Policy group and where appropriate through specialised consultation with affected groups. All policies are equality impact assessed. The Trust continuously supports the development of best practice. Due to the pandemic the Policy Group meetings were paused for several

months. However, the following policies, procedures and guidance were reviewed and agreed:

- Equality, Diversity and Inclusion Policy
- Policy for supporting Trans and Non-Binary Staff
- Recruitment and Selection Policy and Procedure
- Annual Leave Procedure

Health & Wellbeing

The Trust continues to make progress with supporting the health and wellbeing offer for staff especially as we start to move through the recovery phases of COVID-19. The work around health and wellbeing and staff engagement contributes significantly to equality, diversity and inclusion, particularly when there is focus on supporting mental health issues and developing support for staff to help eliminate barriers.

We have a number of communication tools we use to keep staff informed and updated on all support available for Health & Wellbeing. 'Invest in Yourself' is the Trust's approach that aims to support staff in improving health and wellbeing both in and out of the workplace. We have developed and created specific support pages within our staff Intranet with an area specifically created for COVID-19 support which sits within our Invest in Yourself site, Staff App and intranet. We also utilise social media for promotion of Health & wellbeing support and this way, it makes support available 24/7 and accessible for all staff.

The Trust recognises that improving mental health is an important issue for staff who may face challenging situations on a daily basis and this has been increasingly impacted by the pressures of COVID-19. At the start of 2020/21 we launched an Employee Assistance Programme (EAP) service which is available for all staff and accessible 24/7 for telephone support which enhances our current support offering including OH provisions such as counselling/therapy and the many resources available for supporting Health & Wellbeing.

We have created a number of in house support guidance documents throughout the pandemic including a full support directory which staff can access 24/7. This signposts staff to all internal and external offers. We have introduced a Financial Wellbeing staff benefit to all staff which includes an educational hub for financial worries or information as well as the offer of loans through salary sacrifice.

We introduced weekly bulletins to enhance staff engagement including a Wednesday Wellbeing bulletin which includes shout outs to staff who have been nominated. This is a great tool and the response to this has been a huge success amongst staff.

Following work with the British Psychological Society, the Trust developed a Mental Health toolkit for managers as part of the Mental Health framework which forms part of the wider workforce strategy. This toolkit will enable managers to structure a

conversation with a staff member about their mental health and wellbeing, and highlights the view that the behaviours managers display make a critical difference on whether a staff member feels supported or devalued. This is due to be launched in early 2021/22. In addition, we have also implemented health and wellbeing conversation via the appraisal route and this will be developed further in 2021/22 to ensure it is embedded and used as a meaningful engagement tool with staff.

More focus has been given on how the Trust can proactively raise awareness on suicide prevention. The Suicide Prevention group meet regularly to discuss ways to enhance existing practices in how we provide support for our staff and patients we serve. A suicide prevention working group is in the process of formulating suicide prevention toolkit to reflect the sensitivities of this subject matter and formulate clear suicide bereavement action cards to assist managers. This will work in conjunction with national suicide prevention work being undertaken by the ambulance sector in conjunction with national partners.

We continue to utilise and promote the support networks and interventions for staff including the PTS Peer Support network, Blue Light Champions and Trauma Risk Management (TRiM) which aims to support staff who have been affected by traumatic events experienced within work. These support networks help to assess staff's mental health fitness and signpost those showing signs of poor mental health early to support to help prevent the development of longer term issues. .

During the pandemic the Trust has used risk assessment extensively to identify risks to staff based on a range of protected characteristics including race, age, pregnancy and disability. In addition to managers working closely with staff where there are known risks, all staff have been encouraged to undertake a risk assessment. This has enabled us to identify and support staff with underlying conditions which may have been previously unknown to the organisation.

In light of the disproportionate impact of the virus on staff from ethnic minority communities, additional steps were taken to provide reassurance and to manage the risk. This included engagement with the Race Equality Network by a range of Directors, bespoke communications to staff identifying support, early roll out of protective hoods to BME staff and completion of risk assessments with a focus on health and wellbeing.

We continue to offer staff benefits via the Staff Portal such as discounts/home electronics/cycle to work and the newly added bike shop scheme. The portal also includes access to the EAP support hub where staff can download various self-help documents in relation to anxiety/stress/depression/bereavement and further support and guidance around Health & Wellbeing.

Compliments, Memberships and Awards

The Disability Confident Scheme extended those at level two for a further 12 months, which means that NWAS maintains Disability Confident Employer (Level 2) status

until November 2021. We continue to use a work plan to ensure progress continues to be made to improve the experience of candidates and staff with disabilities.

We remain signed up the Race at Work Charter, as signed up in December 2018.

NWAS has maintained its membership of the Employers Network for Equality and Inclusion (enei). This has ensured we are able to access resources and external benchmarking on embedding a culture of equality and inclusion. Progress has been made on equality with NWAS moving from a bronze award the previous year to obtaining a silver award in July 2020.

Working with colleagues – regional, national and trade unions

NWAS remains a member of the renamed National Ambulance Diversity and Inclusion Forum (NADF), which meets quarterly to share best practice of diversity with colleagues from across the ambulance sector and use expertise to inform the Association of Ambulance Chief Executives how national or NHS initiatives on inclusion may impact on the sector.

Trust representation at the National Ambulance LGBT Network is undertaken by the NWAS LGBT Network. However the Corporate HR Team has built a relationship and will link in directly with the National Ambulance LGBT Network as and when necessary. The resources created by this national group are an asset to NWAS in promoting awareness of LGBT issues. There remains a shared LBGT action plan between the team and the local LGBT network about sexual orientation, trans and non-binary issues in the workplace.

The National Ambulance BME Forum continues to develop and NWAS has been engaged with the Forum. With the development of the Race Equality Network in NWAS, Trust representation at the national group is now undertaken by designated representatives from the local network. Again, the Corporate HR Team will link in directly with the national group as required. Events such as webinars about race hosted by the National Ambulance BME Forum and AACE have been promoted to staff. Statements from the group have also been circulated across the Trust. Local network members have also been supported to link in with regional BME NHS Network leads to share advice and support.

The Trust has continued to link in with North West NHS Equality and Diversity Leads meetings and other regional meetings when possible. During the pandemic, NWAS has also engaged with National NHS webinars relating to race, disability and trans – to hear about the impact of the pandemic on different staff groups or how their particular issues have been covered in the NHS People Plan. Staff from the local NWAS networks have also been invited to these as NWAS representatives.

Specific Equality Duty

In addition to the General Duties, the Public Sector Equality Duty sets out requirements for the public sector to:

- Publish relevant, proportionate information demonstrating their compliance with the Equality Duty
- To set themselves specific, measurable equality objectives

Although this annual report itself sets out how the Trust has been working to meet its equality duties, this section looks at how the specific duties have been met.

Employment Monitoring Information

NWAS publishes data on an annual basis to show a breakdown of the characteristics of who works for the Trust. Similar data about applicants, those shortlisted and those who started employment with the Trust are also published. The employment monitoring data has been published on the Trust website and relates to the 12 months prior to 31st December 2020.

A summary of some of the data is available at Appendix 4.

Equality Delivery System (EDS2)

The Trust uses a national framework, the Equality Delivery System (EDS2) to measure progress against reducing health inequalities and improve staff experience. The framework covers all nine protected characteristics and disadvantaged groups against four overarching themes.

As part of the EDS2 framework, the Trust is obliged to share our progress on equality with both internal and external stakeholders. Progress is monitored over an agreed period of time to demonstrate progress.

The Trust completed its last cycle of work in early 2020. The progress made during that time and the stakeholder events were covered in the report from last year, as the events took place at the start of 2020.

Originally, there were plans for the Trust to reassess its position after a further period of 3 years but this will now be extended to the end of 2023/4. This aligns the framework cycle to end at the same time as the newly agreed equality priorities and account for the disruption to the Trust during 2020-2021 while responding to the pandemic.

There had been national discussions within the NHS about further revisions to the EDS2 framework prior to March 2020, with a potential revised framework being called EDS3. National progress and updates about this review have also been delayed, so NWAS agreeing to monitor EDS2 progress over the same timeframe as our objectives will also give time for any new frameworks to develop before moving onto an updated version.

What is EDS2 in practice?

The objective is to assess health inequalities and provide better working environments, free of discrimination, for people who use, and work for, the Trust.

The tool sets out four goals around equality, diversity and human rights. Within the four goals, there are 18 standards or outcomes, against which we assess and grade our equality performance. The focus of the EDS2 outcomes is on the things that matter the most for patients, communities and staff.

- Better Health outcomes for all
- Improved Patient access and experience
- Empowered, engaged and well supported staff
- Inclusive leadership at all levels

Work has taken place across the footprint to improve outcomes for staff and patients. The work is varied and includes both short-term and long-term pieces of work.

Examples of progress

Highlights of work include:

- The development of the Patient and Public Panel has been a turning point for the Trust. The panel offers staff and managers a chance to receive input from the communities we serve so that we can better support our patients. NWAS hopes that our members also gain knowledge and skills from taking part.
- The internal communications, particularly during the pandemic, have been well received, with the Communications Team being recognised externally for their work in making sure staff and the public were kept up to date.
- NWAS has appointed our first Public Health Registrar. We look forward to the role the Trust plays in supporting public health to grow.
- Freedom to Speak Up Champions have been recruited to and the visibility of this method of raising concerns continues to grow.

Workforce Race Equality Standard (WRES)

NWAS has again published the most recent data for the Workforce Race Equality Standard, which was signed off during summer 2020. An action plan was published to support the work to reduce the inequalities in the experiences of working at the Trust which exist between White and Black and Minority Ethnic (BAME) Staff. The strategy adopted focuses on workforce representation, looking specifically at frontline operational roles, and the staff experience aspects of the WRES.

Meetings continue to be held regularly to review progress against objectives to ensure that there is momentum across the Trust relating to this work. Data has been shared at Race Equality Forums over the last 12 months. There have been discussions with managers by the Corporate HR Team and as the forum has moved to a formal staff network, Committee members have also raised the profile of WRES through the meeting managers and the launch event in January 2021.

Overall the WRES data showed a mixed picture of results with some positive improvements in representation and staff experience but some areas for continued focus in recruitment, disciplinary processes and training.

Activity in support of the WRES

- Support for staff voice to discuss workforce race equality at NWS – increase in number of forums, senior visible support for the group, launch of formal network marking a shift from staff voice sessions being staff led, rather than facilitated by the Trust
- Further reduction in 'ethnicity unknown' in Trust data from 1.8% to 1.2% through local work plan action.
- Data collation has improved with increase in number of staff recorded as having had CPD/non-mandatory training.
- Activity relating to tackling bullying and harassment from internal and external sources has been varied. The Freedom to Speak Up (FTSU) Guardian has worked with the Corporate HR Team in promoting FTSU as an option for staff, including sharing joint statements from national WRES and FTSU leads. Race Equality Network member attends the Violence and Aggression Groups. The Trust has developed a 'Treat me Right' campaign, due to be launched in early 2021/22. This seeks to reinforce and further embed our Dignity at Work Policy and highlight the importance of informal resolution and civility and respect at work

The detail of the WRES data summer 2020 can be found on the Trust's website at:

<https://www.nwas.nhs.uk/publications/workforce-race-equality-standard-wres-2020-data/>

Gender Pay Reporting

The Trust data for the statutory gender pay gap is detailed below and is taken from 31st March 2020. This is the data reported during the period of time covered by the annual report.

Overall representation of female staff has increased within the workplace from 46.8% to 48.9%. Female representation within each quartile of staff has also increased. Representation in the highest quartile of pay has increased from 34% to 36.7%.

Gender Pay Gap reporting up to end March 2021 shows that the gap in the hourly rate of pay between male and female staff reduced from of 8.9% in March 2019 to 8.79% in March 2020. The average median rate of pay also reduced from a difference of 8.3% to 7.2%. Representation within each of the quartiles showed an increase, with the top-earning quartile having been a key area of focus. Progression into the highest paid roles is dependent on vacancies created through the year which require recruitment and it is this progression and movement within the Trust which will impact positively on the gender pay gap.

As cited in previous years, the action plan focuses on recruitment, career progression and flexible working to enable progression of women within the

organisation into the higher pay quartiles. It was expected that these themes would require long-term pieces of work and therefore why these themes remain relevant.

The progress shown in the data this year is likely to be the result of the Women in Leadership programme run in 2019/20 along with opportunities to recruit to roles in the highest paid quartile and the embedding of the assessment centre process, brought in to support selection of leadership positions. The centres are designed to reduce any potential bias in the selection process. The centres themselves remain under review to take account of feedback from candidates and invigilators involved in the process.

Information about the Trust gender pay gap can be found on our website at:

<https://www.nwas.nhs.uk/about/valuing-staff/gender-pay-gap/>

Workforce Disability Equality Standard (WDES)

The WDES metrics were published for only the second time in September 2020. The data showed the differences in staff and candidate experience when comparing those who have disclosed a disability and those who have not. The data was drawn from ESR and the staff survey. The data relating to representation showed a mixed picture across the Trust but we know that there are currently high levels of staff not disclosing disability. The staff survey data showed a poorer experience for our disabled staff but the gap has decreased and reporting incidents is also positive.

An action plan was produced and focused on the following areas:

- Continue with development and trial of a Disability passport – this has since been renamed the work and wellbeing passport. It has been piloted during 2020/21 with evaluation and further roll out planned for early 2021/22.
- Promote self-declaration through guidance on ESR self service
- Improving staff voice through development of the disability forum.
- Reviewing the outcomes of the WDES in relation to the review of the sickness procedure due in 2020.

Equality Priorities

The report last year detailed the equality objectives which the Trust had worked on for four years. Progress was made on improving diverse representation within the workforce, improved staff experience about bullying and harassment, identifying improvements on patient data and exploring service provision relating to dementia patients.

The impact of COVID-19 led to an initial delay of agreeing a new set of objectives. However, the delay enabled the Trust to reflect on the disproportionate impact of COVID 19 on ethnic minority communities and the messages of the Black Lives Matter

movement highlighted the disparity in the experience of BAME staff and the severe health inequalities experienced in BAME communities. This has prompted an increased focus at both a national and regional level on progress in reducing inequalities for BAME staff and patients.

As a Trust we have recognised the need to change our approach to Diversity and Inclusion. Whilst acknowledging that good incremental progress has been made over recent years to improve representation and staff experience, it is recognised that there is a need to increase our ambition and provide a clear and resourced commitment to make a step change in the experience of staff and patients.

The following priorities have been developed and were agreed by Board in January 2021. These will form our statutory equality objectives and will be supported by detailed action plans and measures:

PRIORITY 1

We will ensure our current employees and future talent have fair opportunities and access to jobs and career progression resulting in improved representation of diverse groups at all levels of the organisation, including Board.

This priority will be supported through a series of targets for improved representation covering both recruitment and progression. An action plan has been developed to support the progression of this priority and includes a focus on under-representation of individuals from BAME communities with an aim to improve representation in the workforce from BAME communities to 8% by 2024.

PRIORITY 2

We will educate and develop our leaders and staff to improve understanding of racism, discrimination and cultural competence to deliver a step change in the experience of our staff and patients.

From a workforce perspective, the ambition will be to eliminate the gaps in staff experience measured through key staff survey indicators along with WRES and WDES data. Measurements from a patient perspective will include both quantitative and qualitative measures associated with clinical audit and patient experience.

PRIORITY 3

We will improve our use of patient data and patient experience to drive improvements in access and health inequalities, for patients from diverse communities

Measurements to support this priority will be evidenced through evaluation of changes and improvements made as a result of data analysis and feedback.

Appendix 1 - Community Engagement Activity Plan 2020/21

Key:

Communications and Engagement

Patient Engagement

Patient and Public Panel



<u>April 20</u>	Objectives /Reason for Engagement	Follow up & Contact	Protective Characteristic (user group)	Update/ Action	RAG
All Patient Engagement events were cancelled/postpone due to Covid-19. Virtual events commenced from July 2020					
<u>May 20</u>	Objectives /Reason for Engagement	Follow up & Contact	Protective Characteristic (user group)	Update	RAG
All Patient Engagement events were cancelled/postpone due to Covid-19. Virtual events commenced from July					

2020					
27 th May - Virtual taster evening	Those who have expressed an interest were invited.		PPP (6)		
June 20	Objectives /Reason for Engagement	Follow up & Contact	Protective Characteristic (user group)	Update	RAG
All Patient Engagement events were cancelled/postpone due to Covid-19. Virtual events commenced from July 2020					
2 nd June - EOC Learning Forum	PPP influence members given opportunity to attend EOC learning forum.		PPP (2)		
9 th June – PPP Induction evening	Those who have expressed an interest were invited.		PPP (4)		
10 th June - Cheshire &	PPP influence		PPP (1)		

Mersey Area Learning Forum	members given opportunity to attend C&M learning forum.				
17 th June - Q&A session with CEO and Chair for Influence panel members	PPP Influence members given opportunity to attend Q&A session with CEO and chair.		PPP (9)		
29 th June - Suicide Prevention Work stream meeting	Influence/C o-produce panel members with lived experience of mental healt		PPP (1)		
<u>July 20</u>	Objectives /Reason for Engagement	Follow up & Contact	Protective Characteristic (user group)	Update	RAG
14 th July - EOC Learning Forum	All PPP influence members given opportunity to attend.		PPP (2)		
15 th July - Virtual Taster Evening	Those who have expressed an interest were		PPP (6)		

	invited.				
20 th July - CAL Area Learning Forum	All PPP influence members given opportunity to attend.		PPP (2)		
23 rd July - PE Session with PPP members - NWS response to COVID-19.	Influence and co-produce members		PPP (11)		
22 nd July 2020 – Sandbach Dementia café – Zoom	<ul style="list-style-type: none"> • Our response to Covid-19 as a trust. • Access to our services and information during pandemic 	Dave Whitworth dpd.whitworth@btinternet.com	Dementia (12)	All feedback recorded on log. We were asked by the group organiser to share information on local initiatives in place to help identify dementia patients – Complete.	
23 rd July 2020 – Sefton Older Persons forum –	<ul style="list-style-type: none"> • Our response to Covid-19 	Justine Shenton Justine.shenton@seftonadvocacy.org	Older people (20)	All feedback recorded on log. Complete.	

Zoom	<ul style="list-style-type: none"> as a trust. • Access to our services and information during pandemic 	g			
24 th July 2020 – CAHN – Zoom	<ul style="list-style-type: none"> • Share best practice • Identify gaps • Address gaps in BAME structure • How to improve accessibility of local services 	info@cahn.org.uk	BAME (4)	All feedback recorded on log. Complete.	

28 th July - PPP Virtual Induction Evening	Those who have expressed an interest were invited.		PPP (7)		
August 20	Objectives /Reason for Engagement	Follow up & Contact	Protective Characteristic (user group)	Update	RAG
3 rd August - Chorley Dementia Group – Zoom	<ul style="list-style-type: none"> • Our response to Covid-19 as a trust. • Access to our services and information during pandemic 	Carol Benabda Carol.Benabda@alzheimers.org.uk	Dementia (15)	All feedback recorded on log. Explore how we can share messaging about social distancing on vehicles and how we are protecting patients – Ongoing	
3 rd August - Healthwatch and Knowsley Older Peoples Voice Work stream – Zoom	<ul style="list-style-type: none"> • Our response to Covid-19 as a trust. • Access to our services and 	David Aspin David.Aspin@healthwatchknowsley.co.uk	Healthwatch /Older People shielding (12)	All feedback recorded on log – Find out more information about the new flu vaccine and share with the group. Contact group lead	

	infor mati on durin g pand emic			about PPP involvement . Complete	
6 th August - Healthwatch Cumbria – Zoom	<ul style="list-style-type: none"> • Our response to Covid-19 as a trust. • Access to our services and information during pandemic 	Rebecca Knagg Rebecca.Knagg@healthwatchcumbria.co.uk	Older people (10)	All feedback recorded on log	
7 th August - NHS 111 First Session	All PPP members invited to NHS111 first session.		PPP (14)		
11 th August - Age UK Trafford – Zoom	<ul style="list-style-type: none"> • Our response to Covid-19 as a trust. • Access to our services 	Ann Marie Jonesannmarie.jones@ageuktrafford.org.uk	Dementia (15)	All feedback recorded on log	

	and information during pandemic				
11 th August - Friendlier Fleetwood – Zoom	<ul style="list-style-type: none"> • Our response to Covid-19 as a trust. • Access to our services and information during pandemic 	David listening@healthierfleetwood.co.uk	Older people (14)	All feedback recorded on log	
12 th August - Cheshire & Mersey Area Learning Forum	All influence members invited to C&M area learning forum.		PPP (1)		
14 th August - Visual Impairment Forum – Zoom	<ul style="list-style-type: none"> • Our response to Covid-19 as a trust. • Acce 	Kiran Binati Kiran.Banati@lancashire.gov.uk	Visual Impairment (25)	All feedback recorded on log	

	<p>ss to our services and information during pandemic</p>				
<p>14th August - Brothers of charity – Zoom</p>	<ul style="list-style-type: none"> • Our response to Covid-19 as a trust. • Access to our services and information during pandemic 	<p>Daniel Hall - daniel.hall@brothersofcharity.org.uk</p>	<p>Learning disabilities (16)</p>	<p>All feedback recorded on log. Arrange to meet with group again to update on NHS111 First when it has been launched in their area. Complete.</p>	
<p>17th August - Virtual Taster Evening</p>	<p>Those who have expressed an interest were invited.</p>		<p>PPP (7)</p>		
<p>18th August - NHS 111 First Additional</p>	<p>All PPP members invited to attend NHS</p>		<p>PPP (8)</p>		

Session	First additional session.				
18 th August - Merseyside Autistic Adults – Zoom	<ul style="list-style-type: none"> • Our response to Covid-19 as a trust. • Access to our services and information during pandemic 	Lydia - merseysideautisticadults@gmail.com	Autism (6)	All feedback recorded on log. Complete.	
18 th August – ‘Connect’ AGE UK group – Zoom	<ul style="list-style-type: none"> • Our response to Covid-19 as a trust. • Access to our services and information during pandemic 	Ann Marie Jones annmarie.jones@ageukrafford.org.uk	Older People (15)	All feedback recorded on log. Complete.	

19 th August - NHS 111 First Session	All PPP members invited to attend NHS111 First session.		PPP (7)		
19 th August – ‘Blossom’ AGE UK group – Zoom	<ul style="list-style-type: none"> • Our response to Covid-19 as a trust. • Access to our services and information during pandemic 	Ann Marie Jones annmarie.jones@ageuktrafford.org.uk	Older People (12)	All feedback recorded on log. Complete.	
20 th August - PPP NWAS Values Focus Group	Influence and Co-produce members invited to take part in NWAS values focus group.		PPP (16)		
20 th August - Preston Dementia Café – Zoom	<ul style="list-style-type: none"> • Our response to Covi 	Carol Benabda Carol.Benabda@alzheim	Dementia (16)	All feedback recorded on log. Complete.	

	<p>d-19 as a trust.</p> <ul style="list-style-type: none"> • Access to our services and information during pandemic 	cheshire.org.uk			
27 th August - ePR Focus Group Session with PPP members	Co-produce members invited to take part in EPR focus group session.		PPP (14)		
<u>September 20</u>	Objectives /Reason for Engagement	Follow up & Contact	Protective Characteristic (user group)	Update	RAG
1 st September - EOC Learning Forum	All PPP influence members invited to take part in EOC learning forum.		PPP (2)		
8 th September - Carers trust Cheshire and Warrington Luncheon	<ul style="list-style-type: none"> • Our response to Covid-19 as a trust. 	Sue Dale susan@cheshirehireandwarringtoncarers.org	Carers support (10)	All feedback recorded on log. Complete.	

Club – Zoom	<ul style="list-style-type: none"> • Access to our services and information during pandemic 				
9 th September - Virtual Induction Evening	Those who have expressed an interest were invited.		PPP (7)		
9 th September – Healthwatch Warrington Coffee morning – Zoom	<ul style="list-style-type: none"> • Our response to Covid-19 as a trust. • Access to our services and information during pandemic 	Crissy Morad crissi.morad@healthwatchwarrington.co.uk	Healthwatch (6)	All feedback recorded on log. Complete.	
14 th September - Complaints	All influence members invited to		PPP (1)		

Review Panel	take part in complaints review panel.				
21 st September - CAL Area Learning Forum	All influence members invited to take part in CAL area learning forum.		PPP (2)		
22 nd September - NWS AGM	All PPP members invited to NWS AGM virtual event.		PPP (5)		
22 nd September - Merseyside Youth Association – Zoom	<ul style="list-style-type: none"> • Our response to Covid-19 as a trust. • Access to our services and information during pandemic 	Leigh Horner LeighH@mya.org	Young People (8)	All feedback recorded on log. Complete.	
23 rd September - Cheshire Carers	<ul style="list-style-type: none"> • Our response to Covi 	Clare Crerand clarec@cheshirecarers.org hireandwarr.org	Carers support (12)	All feedback recorded on log. Complete.	

Group – Zoom	<ul style="list-style-type: none"> d-19 as a trust. Access to our services and information during pandemic 	ingtoncarers.org			
24 th September - GM Area learning Forum	All influence members invited to GM area learning forum.		PPP (1)		
24 th September – Virtual taster evening	Those who have expressed an interest were invited.		PPP (1)		
28 th September - South Asian Holistic Mental Health Support Service - Living with Covid - Let's talk about our wellbeing – Zoom	<ul style="list-style-type: none"> Our response to Covid-19 as a trust. Access to our services and information 	Fiona McInroy office@manchesterbme-network.co.uk	BME/Mental health (10)	All feedback recorded on log. Continued promotion of PTS and NHS 111 with BAME communities. Ongoing.	

	on durin g pand emic				
29 th September - Mental Health and Dementia Strategy Group meeting	Influence and Co- produce members with lived experience of mental health and dementia invited to meeting.		PPP (1)		
29 th September - Macclesfield Stroke Recovery Café – Zoom	<ul style="list-style-type: none"> • Our response to Covid-19 as a trust. • Access to our services and information during pandemic 	Diane Warhurst Diane.Warhurst@stroke.org.uk	Stroke Recovery (12)	All feedback recorded on log. A key learning point from our engagement with this group is that many of the questions and queries were of clinical orientation, hence consideration needed for clinical support with these types of patient groups for future	

				engagement s. Ongoing.	
30 th September - Learning Disability Partnership Meeting – Zoom	<ul style="list-style-type: none"> • Our response to Covid-19 as a trust. • Access to our services and information during pandemic 	Kiran Binati Kiran.Banati@lancashire.gov.uk	Learning disabilities (20)	All feedback recorded on log. Complete.	
30 th September- NWAS Board of Directors Meeting	All influence members invited to meeting.		PPP (4)		
30 th September - Warrington Speak Up LD Group - Zoom	<ul style="list-style-type: none"> • Our response to Covid-19 as a trust. • Access to our services and information 	Pippa pip@advocacyhub.org.uk	Learning Disabilities (14)	All feedback recorded on log. Complete.	

	on durin g pand emic				
October 20	Objectives /Reason for Engagement	Follow up & Contact	Protective Characterist ic (user group)	Update	RAG
6 th October - EOC Learning Forum	All influence members invited to EOC learning forum.		PPP (2)		
7 th October - Cheshire East – Integrated Adult Commissioni ng group	<ul style="list-style-type: none"> • Our response to Covid-19 as a trust. • Access to our services and information during pandemic 	Jill Stenton Jill.Stenton @cheshiree ast.gov.uk	Older people (10)	All feedback recorded on log. Complete.	
7 th October Healthwatch Wirral BRIDGE Forum	<ul style="list-style-type: none"> • Our response to Covid-19 as a 	Mike Spare5@healthwatchwirral.co.uk	Healthwatch (20)	All feedback recorded on log. Complete.	

	<ul style="list-style-type: none"> trust. Access to our services and information during pandemic 				
8 th October - Virtual Induction Evening	Those who have expressed an interest were invited.		PPP (5)		
13 th October - Healthwatch Salford Network Meeting – Zoom	<ul style="list-style-type: none"> Our response to Covid-19 as a trust. Access to our services and information during pandemic 	Mark Lupton mark@Healthwatchsalford.co.uk	Healthwatch (15)	All feedback recorded on log. Complete.	
21 st October - CAM Area Learning	All influence members invited to		PPP (1)		

Forum	area learning forum.				
22 nd - 26 th October - PTS Mystery Shopper Exercise	Influence and Coproduce members invited to take part in PTS Mystery Shopper exercise.		PPP (14)		
23 rd October - Healthwatch Oldham – MS Teams	<ul style="list-style-type: none"> • Our response to Covid-19 as a trust. • Access to our services and information during pandemic 	Tamoor Tariq tamoor.tariq@healthwatcholdham.co.uk	Healthwatch	All feedback recorded on log. Complete.	
<u>November 20</u>	Objectives /Reason for Engagement	Follow up & Contact	Protective Characteristic (user group)	Update	RAG
10 th November - PPP Digital strategy discussion	6 Influence and Co-produce panel members		PPP (3)	3 Influence panel members with an interest in	

session	with an interest in digital development.			digital development attended	
11 th November - Virtual Taster Evening	Those who have expressed an interest were invited.		PPP (5)		
12 th November - Sefton Older Persons Forums – Zoom	<ul style="list-style-type: none"> NHS 111 update NHS 111 First key messages and actions 	Justine Shenton Justine.shenton@seftonadvocacy.org	Older people (20)	All feedback recorded on log. Complete.	
17 th November - Influence PPP Q&A Session with Executive team	All influence members invited to take part.		PPP (12)		
17 th November - EOC Learning Forum	All influence members invited to take part.		PPP (2)		
18 th November - PPP Development	All PPP members invited to take part.		PPP (21)		

t Session - National Safeguarding Week					
18 th November - Healthwatch Wirral BRIDGE Forum – Zoom	<ul style="list-style-type: none"> Shared NWA S campaigns 'What3Words' App and 'Make sure emergency services can find you this winter' 	Micha Woodworth Micha.Woodworth@healthwatchwirral.co.uk	Healthwatch (20)	All feedback recorded on log. Complete.	
24 th November - CAL Area Learning Forum	All influence members invited to attend.		PPP (1)		
25 th November - NWAS Board of Directors Meeting	All influence members invited to attend.		PPP (7)		
25 th November - Warrington	<ul style="list-style-type: none"> NHS 111 update 	Pip - pip@advocacyhub.org.uk	Learning disabilities (20)	All feedback recorded on log.	

Speak Up LD Group – Zoom	<ul style="list-style-type: none"> NHS 111 First key messages and actions 	k		Complete.	
26 th November - Morning PPP work plan session with Consult & Co-produce groups	Consult and Coproduce members invited to attend.		PPP (13)		
26 th November - Evening PPP work plan session with Consult & Co-produce groups	Consult and Coproduce members invited to attend.		PPP (10)		
26 th November - GM Area learning Forum	All influence members invited to attend.		PPP (1)		
26 th November - Healthwatch Rochdale – Zoom	<ul style="list-style-type: none"> Our response to Covid-19 as a trust. Access to our services 	Tracey Coatman tracey.coatman@healthwatchrochdale.org.uk	Mental health (18)	All feedback recorded on log. Complete.	

	and information during pandemic				
27 th November - PPP Digital Strategy Session	Influence and Coproduce members invited to attend.		PPP(3)		
27 th November - Brothers of charity LD group – Zoom	<ul style="list-style-type: none"> NHS 111 update NHS 111 First key messages and actions 	Daniel Hall - daniel.hall@brothersofcharity.org.uk	Learning disabilities (15)	All feedback recorded on log.	
30 th November - Complaints Panel Review meeting	All influence members invited to attend.		PPP (1)		
30 th November - Virtual Induction Evening	Those who have expressed an interest were invited.		PPP (5)		

December 20	Objectives /Reason for Engagement	Follow up & Contact	Protective Characterist ic (user group)	Update	RAG
1 st December - PPP work plan session with Influence group	All influence members invited to take part in work plan session.		PPP (4)		
1 st December PPP work plan session with Influence group	All influence members invited to take part in work plan session.		PPP (8)		
2 nd December - Healthwatch Cumbria - 'What matters to you' – Zoom	<ul style="list-style-type: none"> • Our response to Covid-19 as a trust. • Access to our services and information during pandemic 	Nick Colledge nick.colledge@healthwatchlancashire.co.uk	Older people (8)	All feedback recorded on log. Complete.	

9 th December - Halton and Warrington CCG Winter Conference – MS Teams	<ul style="list-style-type: none"> NWA S services general update 	Stefanie Griffiths Stefanie.griffiths@nhs.net	CCG (40)	All feedback recorded on log. Complete.	
16 th December - CAM Area Learning Forum	All influence members invited to take part.		PPP (1)		
18 th December - Community calendar feedback	All consult panel members invited to take part.		PPP	10 panel members provided feedback	
23 rd December - Promotional items feedback	All consult panel members invited to take part.		PPP		
<u>January 21</u>	<ul style="list-style-type: none"> Objective /Reason for Engagement 	Follow up & Contact	Protective Characteristic (user group)	Update	RAG
12 th January - Healthwatch Salford Community Forum – Zoom	<ul style="list-style-type: none"> Our response to Covid-19 as a trust. Access to our services 	Mark Lupton mark@Healthwatchsalford.co.uk	Healthwatch (16)	All feedback recorded on log. Follow up on the questions asked with PTS leads – Ongoing.	

	ces and infor mati on durin g pand emic				
19 th January - PPP pre- meet session around the Proposal Assessment Framework (PAF)	All influence members invited to attend.		PPP (7)		
27 th January - Board of Directors meeting	All influence members invited to attend meeting.		PPP (5)		
27 th January - Virtual Taster Evening	Those who have expressed an interest were invited.		PPP (8)		
February 21	Objectives /Reason for Engagement	Follow up & Contact	Protective Characterist ic (user group)	Update	
1 st February - PPP website developmen t session	All PPP members invited to attend session.		PPP (12)		

2 nd February - PPP website developmen t session	All PPP members invited to attend session.		PPP (11)		
9 th February - ePR update to PPP members	All PPP members invited to attend session.		PPP (24)		
9 th February - NWAS branding workshop with Cornerstone	Influence and Coproduct members invited to attend.		PPP(1)		
9 th February - EOC Area Learning Forum	Two influence panel members who attend regular meetings invited.		PPP (1)		
10 th February - Virtual Induction Evening	Those who have expressed an interest were invited.		PPP(2)		
11 th February - Staying Healthy LD Group – Zoom	<ul style="list-style-type: none"> • Our response to Covid-19 as a trust. • Access to our 	Janice Wycherley janice.wycherley@pathwaysassociates.co.uk	Learning disabilities (!6)	All feedback recorded on log. Complete.	RAG

	services and information during pandemic				
18 th February - CAL Area Learning Forum	Two influence panel members who attend regular meetings invited.		PPP	No PPP members could attend.	
25 th February - PPP Session - NHS England Developing future non-emergency patient transport service	10 Influence & Co-produce panel members with experience of PTS invited to attend.		PPP (5)		
<u>March 21</u>	Objectives /Reason for Engagement	Follow up & Contact	Protective Characteristic (user group)	Update	RAG
2nd March - Heywood, Middleton and Rochdale Circle – Zoom	<ul style="list-style-type: none"> • Our response to Covid-19 as a trust. • Acce 	Kim Ho kim@hmrciracle.org.uk	General (12)	All feedback recorded on log. Complete.	

	ss to our services and information during pandemic				
4 th March - Religion and Belief Forum	One Co-produce panel member from the Jewish community invited to attend.		PPP (1)		
9 th March - Equality, diversity and inclusion development session	All PPP members invited to attend.		PPP (22)		
11 th March - Body worn camera session	All influence and co-produce members invited to attend.		PPP (12)		
15 th March - Tea and talk session	All Influence members invited to attend.		PPP (7)		
16 th March - Tea and talk	All coproduce		PPP (4)		

session - Co-produce	members invited to attend.				
16 th March - Virtual taster evening	Prospective members invited to attend.		PPP		
17 th March - Tea and talk session – Consult	All consult members invited to attend.		PPP (6)		
19 th March - Healthwatch Rochdale - Community Chats group	<ul style="list-style-type: none"> • Our response to Covid-19 as a trust. • Access to our services and information during pandemic 	Sanya Karim sanyakarim1990@hotmail.com	BAME (6)	All feedback recorded on log. Complete.	
22 nd March - Pictorial communications handbook session	All Influence and Co-produce panel members invited to attend.		PPP		
23 rd March - EOC Area Learning	All Influence and Co-produce		PPP		

Forum	panel members invited to attend.				
23 rd March - Pictorial communications handbook session	All Influence and Co-produce panel members invited to attend.		PPP		
24 th March - Influence Q&A session with execs	All Influence panel members invited to attend.		PPP		
24 th March - Healthwatch Wirral BRIDGE Forum – Zoom	<ul style="list-style-type: none"> NHS 111 update NHS 111 First key messages and actions 	<p>Micha Woodworth</p> <p>Micha.Woodworth@healthwatchwirral.co.uk</p>	Healthwatch (23)	All feedback recorded on log. Complete.	

Appendix 2 – Community engagement and Widening Participation recruitment events– 1 April 2020 to 31 March 2021

Date	Event	Sector	Type of event
15/04/2020	Southway Housing Group Careers Fair	GM	Postponed due to Covid-19
24/04/2020	Gorton Apprenticeships/Careers Fair	GM	Postponed due to Covid-19
29/04/2020	WWL Insight Day	GM	Postponed due to Covid-19
12/05/2020	NWAS/CTP Live Chat	NW	Careers – Armed Forces
04/06/2020	Gold Alumni Insight Day	C&M	Postponed due to Covid-19
13/06/2020	Preston Military Show	CAL	Postponed due to Covid-19
30/06/2020	Skills Show Military YP	CAL	Postponed due to Covid-19
02/07/2020	Big Bang	C&M	Postponed due to Covid-19
06/10/2020	Warrington Council Live chat	C&M	Virtual event
13/10/2020	Pledge Schools event - Crewe & Nantwich	C&M	Virtual event – schools
14/10/2020	Pledge Schools event - Northwich & Winsford	C&M	Virtual event – schools
15/10/2020	Pledge Schools event - Ellesmere Port & Chester	C&M	Virtual event - schools
16/10/2020	AHP Day	GM	Virtual event - schools
20/10/2020	Pledge Schools Event - Learn Live	C&M	Virtual event - schools
22/10/2020	Pledge Schools event - Mid Cheshire East	C&M	Virtual event - schools
28/10/2020	Cheshire Works 4 U (Warrington DWP)	C&M	Virtual event - careers
05/11/2020	The UK Careers Fair, Liverpool	C&M	Virtual event - careers
12/11/2020	University of Bolton careers event	GM	Virtual event - university
20/11/2020	Lancashire Digital Careers Journey (LEP)	CAL	Virtual event - careers
23/11/2020	Lancashire Digital Careers Journey (LEP)	CAL	Virtual event - careers
26/11/2020	CTP Step Into Health Virtual Careers Fair	NW	Virtual event - Armed Forces
27/11/2020	CTP Live Chat	NW	Virtual event - Armed Forces
02/12/2020	HEE Event for young people	NW	Virtual event - young people

27/01/2021	Cheshire Works 4 U NY New Start	C&M	Virtual event – careers
03/02/2021	Rainford High School - careers event	C&M	Virtual event – schools
10/02/2021	LJMU Paramedic - service ethos & recruitment	C&M	Virtual presentation
10/02/2021	Fazakerley High School - careers event	C&M	Virtual event – schools
15/02/2021	Halewood Academy - careers event	C&M	Virtual event – schools
17/02/2021	AHP Taster Day session	GM	Virtual event – careers
03/03/2021	AHP Taster Day session	C&M	Virtual event – careers
09/03/2021	STEM Careers event (North)	NW	Virtual event – schools
18/03/2021	AHP Focus Schools Event	GM	Virtual event – schools
24/03/2021	Alsop High School - Challenging Stereotypes	C&M	Virtual event – schools
26/03/2021	Woodchurch High School - careers event	C&M	Virtual event – schools

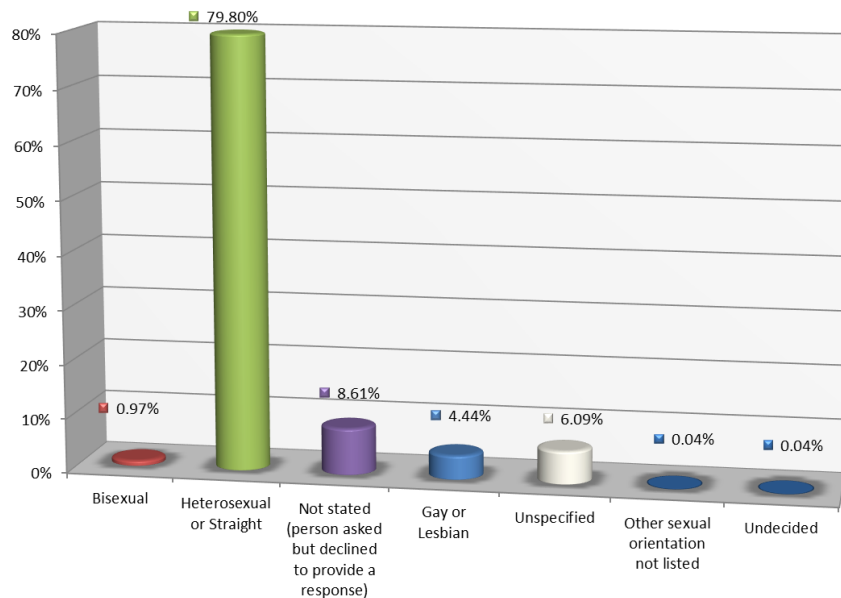
Appendix 3 - North West Ambulance Service and the Armed Forces (see separate info graphic)

Appendix 4: Annual Employment Monitoring Information

Sexual Orientation:

Data Source: ESR as at
31st December 2020

Current Staff: Sexual Orientation By %

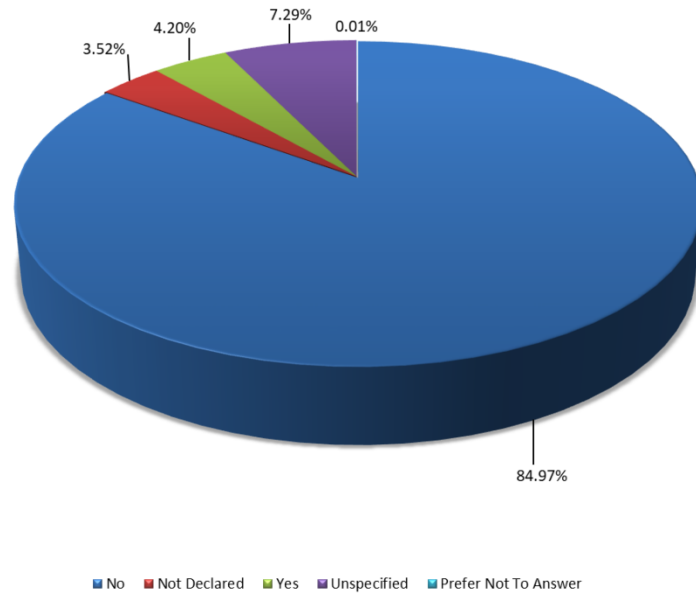


The gay and lesbian categories has increased again from 4.24% to 4.44% staff this year. The rate remains lower than what would be expected of the general population. The figures for bisexual staff have also increased. There has been a continued reduction in non disclosure from over 20% at the end of 2017 to 18.63% and then 16.57% in 2019 and 14.7% this year.

Disability

Data Source: ESR as at 31st December 2020

Current Staff: Disability By %

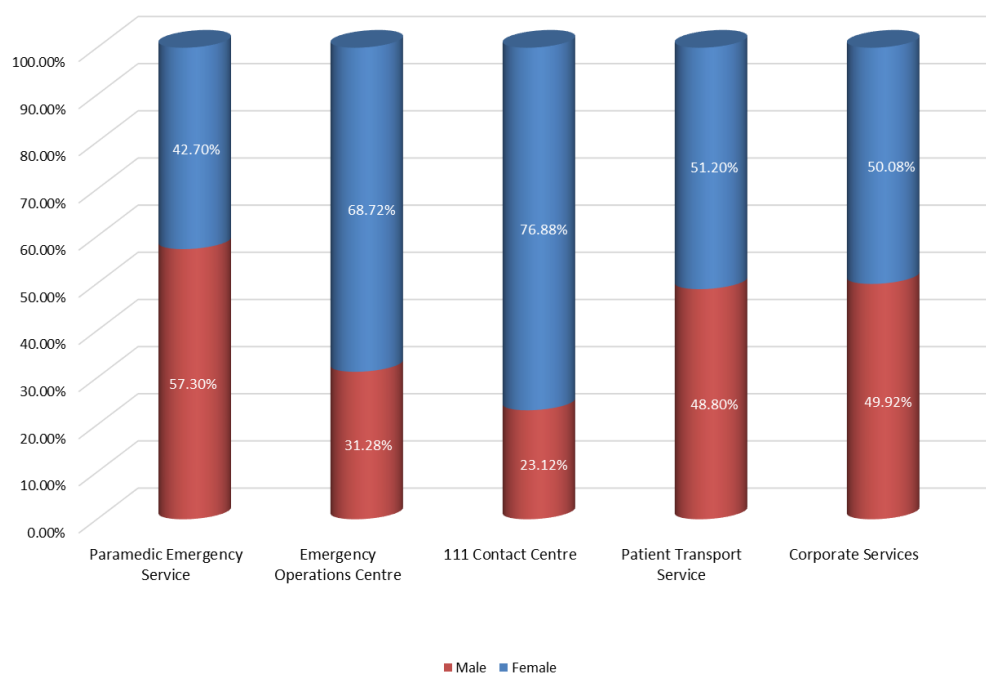


Staff disclosure of a disability had been consistently rising year by year and rose from 3.80% in 2019 to 4.20% in 2020. Those not disclosing their status as disabled or otherwise has decreased from nearly 16% just under 12% in 2019 and in 2020 it had further decreased to 10.81%

Gender

Data Source: ESR as at
31st December 2020

Current Staff: Gender By Service Lines



Female staff now account for 50.76% of the workforce within NWAS. The female proportion has increased in all the 4 operational services like PES, EOC, 111 and PTS:

- PES increased by 1.7%
- EOC increased by 0.8%,
- 111 increased by 3.2%
- PTS increased by 0.9 %

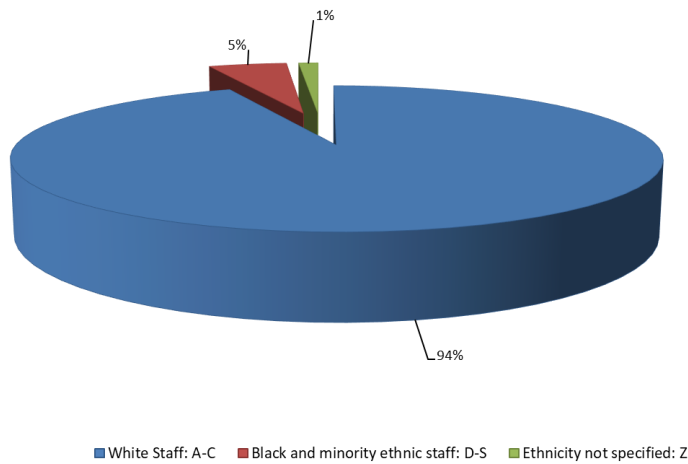
There is significant increase in 111 services and reflects the significant recruitment in 111 over the last 12 months. The graph above shows clear differences in where staff work within the Trust, as it has in previous years. Corporate Services and Patient Transport Service appears to have a good level of gender balance.

Note about Trans applicants and staff: It is not possible for new starters to declare their gender to the Trust as anything other than male or female on the electronic systems used as part of the recruitment process. Staff and candidates have declared their status as transgender to the Trust over the last 12 months, but it is not possible to record this information with only the two binary measures on the electronic systems at this time and no option to record trans status. Therefore there is no information published about this currently; there is also the potential initially that the numbers will be so small as to be personally identifiable.

Current Staff: Ethnicity

Data Source: ESR as at 31st December 2020

Ethnicity of current staff in NWAS



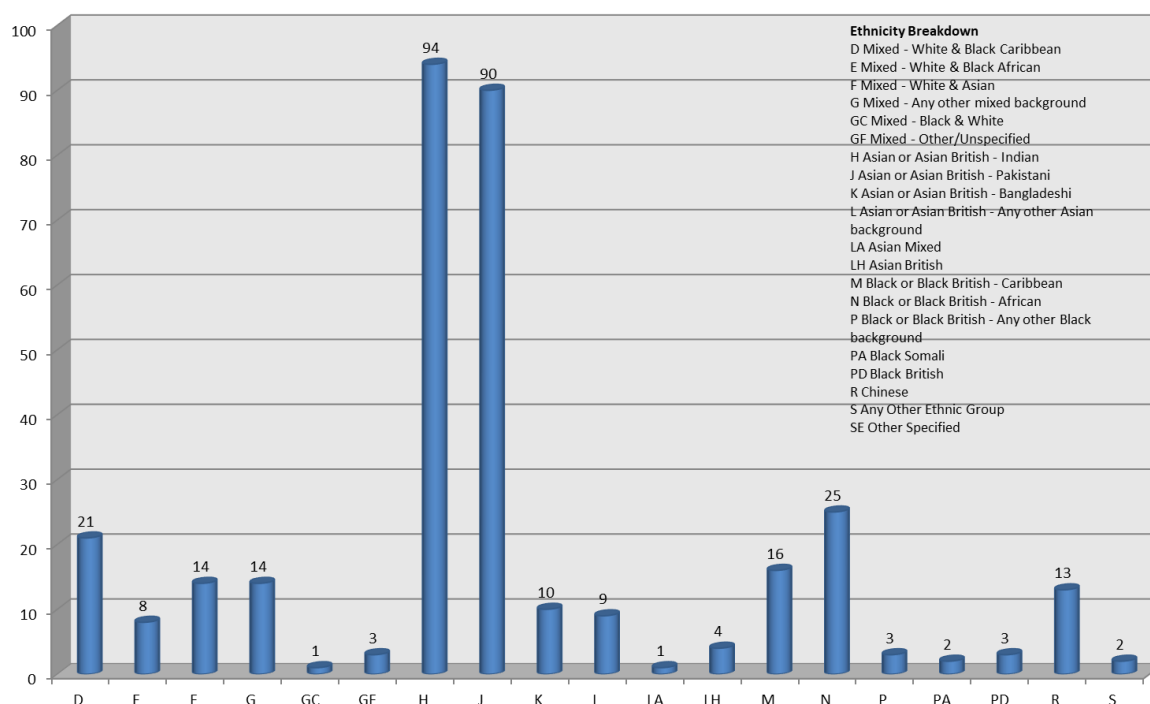
The percentage and overall number of staff from non-white groups has increased from 4.28% to 4.59 % in 2019 and over the 12 month period it had further increase to 4.99%.

NWAS retains good disclosure rates for ethnicity. Not stated or unspecified now stands at 1.25% in 2020, showing continuous reduction in last few years. The rate of non-disclosure information was 1.31% in 2019, a reduction from 1.86% in 2018. This is well below the NHS average for non-disclosure rates.

Breakdown of current staff from non-white groups

Data Source: ESR as at 31st December 2020

Ethnicity of current staff: Black and minority ethnic group



The following provides some narrative on the position in relation to other protected characteristics.

Religion – Following the previous pattern, non-disclosure rates for religion have again reduced, this time from 21.98% to 20.48%

Marital Status – The number of staff for whom the Trust does not know their marital status has reduced again from 348 to 325 over this last year. While this does not appear to cause the Trust any problems, it is important that the Pensions Team are kept up to date with details by employees.

Age – The age of the workforce in various parts of the Trust has again shown a similar pattern to the previous year. The 45-54 age range again has the highest proportion of staff equating to just over 27% of staff.

Data source - All workforce data has been taken from the national NHS Employee Staff Record system at 31st December 2020.