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Executive Summary

I’m pleased to be introducing GMMH’s new Equality, Diversity and Inclusion Strategy for 2019–21.

We are working with staff, service users, carers, Governors and organisations to realise a vision for personal, fair and diverse health and care services, where everyone is included and our Trust values are brought to life. We recognise the importance of making full use of the talents of our diverse staff by supporting them to serve a varied population across Greater Manchester and the north west.

We believe that the principles of equality, diversity and inclusion are critical to us delivering high-quality services and employment for all. This strategy represents the first time the Trust has directly addressed the inclusion agenda, and I am thrilled to be leading our work to build on the commitment and enthusiasm for inclusion displayed by our staff.

The Equality, Diversity and Inclusion Strategy (EDI) is built around the four goals stipulated by the The Equality Delivery System for the NHS (EDS2), which looks at service user health outcomes, experience and access to our services, as well as how representative and supported our workforce is and inclusive leadership. The EDI Strategy supports the Trust’s requirement to meet its obligations under the Equality Act 2010 and incorporate the mandatory requirements for the EDS2, Workforce Race Equality Standard (WRES) and the Accessible Information Standards.

We have set ourselves five priorities based on the feedback from staff, service users and other stakeholders, that we are dedicated to achieving and know we will be supported by commitment across the organisation. We recognise the significance of this strategy in providing a vision and direction for eliminating discrimination, reducing inequalities and improving the health outcomes of our service users and carers.

We are already doing a lot of positive work to address key inclusion issues. For example:

- we are proud to be taking part in Stonewall’s Diversity Champions programme, which provides us with best practice and support from Stonewall to create a fully inclusive workplace for all staff
- we have a LGBTQIA staff network and attend many of the local Gay Pride events each year
- in collaboration with the University of Manchester, we are running a research study (CaSPER) to produce learning resources about schizophrenia and psychosis to African Caribbean families in the UK
- our Recovery Academy provides Deaf Awareness Training, British Sign Language Training, a How Culture Affects Mental Health course, an Understanding Specific Learning Difficulties course, a Faith and Recovery course and a range of ‘Living with…’ courses. These courses are run by staff from across the Trust, including our John Denmark Unit (a service specialising in mental health and deafness) and Chaplaincy service in co-production with our service users and carers. The Academy also works in partnership with external organisations like BSL CoE, Counselling & Creative Learning and BAND.
- as part of Equality, Diversity, and Human Rights Week we organised a series of events, training and roadshows to promote the theme of ‘Diverse, Inclusive, Together’.
- we’ve set up an Inclusivity Network to break down any barriers that stop staff from taking advantage of opportunities available to them. The network run a quarterly networking event and a leadership programme.
• developing our Customer Care service and digital media strategies have given us opportunities to improve the accessibility of finding information and getting in touch with us.

• we are a Living Wage Employer, which is calculated according to what employees and their families need to live and is higher than the Government’s National Living Wage.

• we are highly active in research and innovation and our Clinical Studies Officers promote the research opportunities available to our service users. As a result of this, we have the second highest service user participation rate for research, for a specialist mental health trust in England.

• we have pledged to support the armed forces community by aligning our values with the Armed Forces Covenant and are a bronze award holder of the Defence Employer Recognition Scheme.

• to help tackle homelessness in Manchester, we have a Mental Health and Homeless Team working with homeless people experiencing mental health problems. We work closely with third sector and public sector agencies to share best practice and ideas on improving access to services for the homelessness community across Greater Manchester.

• we are also a Disability Confident employer.

But, there is so much more we need to do to ensure our services are accessible, personalised and meet the diverse needs of our service users. A more inclusive and diverse workforce is critical to achieving this ambition.

This strategy ensures that we continue to champion equality, diversity and inclusion in all that we do for our service users, carers, staff or the wider public.

We will continue to work internally, and in partnership with local organisations and the wider NHS, to ensure that advancing equality and diversity is central to how we conduct our business as an organisation.

We will monitor and report our progress through our Equality and Diversity Committee, Workforce Equality Group, Quality Governance Committee and Board. I am confident that by progressing these priorities we will improve the quality of care and outcomes for our service users.

Neil Thwaite
Chief Executive of GMMH
Equality, Diversity and Inclusion Strategy

Introduction

GMMH was established in January 2017, when the Greater Manchester West Mental Health NHS Foundation Trust acquired Manchester Mental Health and Social Care NHS Trust.

GMMH is one of the leading mental health trusts in the UK, rated ‘Good’ overall by the Care Quality Commission. Our substance misuse services and leadership were rated as ‘Outstanding’.

Serving a population of 1.2 million people, we provide community and inpatient mental health care, alongside substance misuse services across the north west. The Trust has 851 inpatient beds, services in 130 locations across the region, and runs more than 700 community and outpatient clinics a week. In the last year, we treated 53,000 service users.

The Trust provides a range of specialist services including prison in reach across the North of England, a specialist centre for mental health and deafness (one of only three in the UK) and inpatient perinatal mental health care.

The Trust employs around 4750 people, who work to improve lives with a culture based on five core values that underpin and guide everything we do.

Acknowledgements

We would like to thank all the service users, carers and staff who were instrumental in the development of Greater Manchester Mental Health NHS Foundation’s Trust’s (GMMH) Equality, Diversity and Inclusion Strategy.

We are grateful to everyone who attended our consultation events, contributed to our equality quiz and completed our online staff equality survey. We would like to express our gratitude to our external stakeholders and the voluntary groups supporting our equality and diversity work and shaping the key areas we need to prioritise.

During NHS Equality and Diversity Week in May 2018, we displayed an advert on all computer backgrounds with a survey link for all GMMH staff to complete. We received an overwhelming response with 621 staff (12% return rate) completing the equality, diversity and inclusion survey. The questions were tailored around the NHS Equality Delivery System (EDS2), and elicited feedback surrounding staff’s views of service user health outcomes, service user experience and access to our services, the diversity of our workforce and inclusive leadership.

During the same week, the Trust’s Equality Leads visited services across Greater Manchester and facilitated focus groups with both service users and staff. Approximately 50 service users and 35 staff were consulted across the Trust including; Chapman Barker Unit - Substance Misuse, Griffin - Young Person Transitional Service, Trafford Moorside - Acute Assessment, Rockley House and Keswick - Adult Forensic Service.

To support the consultation process and ascertain the needs of our service users, an equality and diversity quiz was used to stimulate conversations surrounding meanings, current gaps and future requirements of the organisation.

To support the development of the Workforce Strategy and the Workforce Race Equality Scheme (WRES) senior managers, staff side representatives, staff members and Black, Asian, and Minority Ethnic (BAME) staff network helped shape the strategy and associated actions.
This strategy reflects our organisation’s commitment to ensure our services are accessible and meets the diverse needs of the populations we serve. Additionally, it aims to positively promote inclusivity and ensure our treatment pathways are always personalised. It also identifies our workforce aspirations and establishes priority areas to support and promote diversity and inclusion for all staff.

This strategy sets out our approach of ensuring equality, diversity and inclusion is everybody’s

**Trust Values**

Our values underpin and guide everything we do. Our Trust values are:

- We inspire hope
- We work together
- We are caring and compassionate
- We value and respect
- We are open and honest

**Trust Objectives**

Our organisational objectives are designed to deliver our vision of ‘Improving Lives’. Our objectives are:

- To promote recovery by providing high quality care and delivering excellent outcomes
- To work with service users and carers to achieve their goals
- To engage in effective partnership working
- To invest in our environments
- To enable staff to reach their potential and innovate

This strategy sets out the equality priorities and actions that will enable the organisational objectives to be achieved.
## Definitions

<table>
<thead>
<tr>
<th>Term</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>BAME</td>
<td>Black, Asian, and Minority Ethnic (used to refer to members of non-white communities in the UK).</td>
</tr>
<tr>
<td>Carer</td>
<td>is used to describe any person who provides unpaid practical or emotional support to someone with a disability, addiction or illness. The person may be a relative, partner, friend or neighbour. A carer can be of any age and may be a young person providing assistance to a parent or another person. A carer may live with the person they care for or provide support from a distance.</td>
</tr>
<tr>
<td>Diversity</td>
<td>acknowledges and values the full range of differences between people both in the workplace and in wider society.</td>
</tr>
<tr>
<td>Equality</td>
<td>is about creating a fairer society where everyone can participate and has the same opportunity to fulfil their potential. Equality is backed by legislation (eg, Equality Act 2010) designed to address unfair discrimination, harassment and victimisation.</td>
</tr>
<tr>
<td>Inclusion</td>
<td>is about positively striving to meet the needs of different people and taking deliberate action to create environments where everyone feels respected and able to achieve their full potential.</td>
</tr>
<tr>
<td>LGBT</td>
<td>Lesbian, Gay, Bisexual, and Transgender.</td>
</tr>
<tr>
<td>Protected Characteristics</td>
<td>are age, disability, sex, gender reassignment, pregnancy and maternity, race, religion or belief, sexual orientation, marriage and civil partnerships.</td>
</tr>
<tr>
<td>Service user</td>
<td>is used to describe anyone that is under the care of GMMH either as an inpatient or within community services.</td>
</tr>
</tbody>
</table>
Public Duties

The **Public Sector Equality Duty (PSED)** that is set out in the Equality Act 2010 requires public authorities, in the exercise of their functions, to have due regard for the need to:

- Eliminate unlawful discrimination, harassment and victimisation and other conduct prohibited by the Act.
- Advance equality of opportunity between people who share a protected characteristic and those who do not.
- Foster good relations between people who share a protected characteristic and those who do not.

The PSED also asks organisations to set equality objectives at least every four years. Our equality objectives for 2016-2019 are:

- To strengthen data collection of the protected characteristics of our service users
- To strengthen data collection of the protected characteristics of our workforce
- To collate and monitor data on the protected characteristics of our service users who make complaints
- To set local equality objectives in our business development plans
- To undertake equality impact assessments on our policies and business development plans to ensure they meet the needs of, and do not disadvantage, service users of any protected characteristics.

Equality objectives have helped us to focus our core business surrounding equality and diversity; however, it is acknowledged there is still work to be done and any outstanding actions from the objectives will be translated into this strategy.

**The Equality Act (2010)** and PSED also requires the Trust to publish equality objectives and related information annually, this is demonstrated via an Annual Equality and Diversity report. These reports include information, disaggregated by service, on the protected characteristics of our workforce and service users. We aim to publish our annual equality report in January each year in line with statutory requirements set out in equality legislation.

**Equality Delivery System (EDS)** 2 is an assessment tool designed to measure NHS equality performance with an aim to produce better outcomes for people using and working in the NHS and to gather equality evidence that demonstrates compliance with the PSED of the Equality Act (2010). GMMH delivers annual Trust and local workshops to ensure we are actively monitoring our equality performance.

**Gender Pay Gap Information Regulations 2017** requires the Trust to publish six calculations relating to gender pay. The gender pay gap shows the difference in the average pay between all men and women in a workforce.

**The Workforce Race Equality Standard (WRES)** is a set of nine specific measures that all NHS organisations are required to measure with associated actions demonstrating how trusts are addressing race equality issues across its workforce.
Our achievements so far

The Trust has taken forward significant pieces of work to develop equality, diversity and inclusion across our services and workforce. This strategy is designed to build on our successes and fully embed equality and diversity into everything we do.

The following are some examples of our achievements and successes across the protected characteristic groups.

Religion or belief
The GMMH chaplaincy department has started to develop a Spiritual Wellbeing Strategy and have begun consulting service users and staff. This Strategy will be launched in 2019.

Disability
The GMMH website has been adapted to ensure information about clinical services and suicide prevention resources are available in British Sign Language (BSL). Additional to this, all of GMMH’s electronic feedback devices have an introduction video with BSL interpretation. A Disability Passport has been developed to make it easier for disabled staff to transfer agreed reasonable adjustments should they move workplaces.

Pregnancy and maternity
GMMH are the new provider of the Specialist Perinatal Community Mental Health Team across Greater Manchester. This Greater Manchester-wide service will work to develop an integrated pathway approach, work with colleagues in maternity services, health visiting services, parent and infant mental health services, child and family services and adult mental health services in GMMH, Pennine Care NHS Foundation Trust and North West Boroughs NHS Foundation Trust.

Gender reassignment
GMMH has developed a gender identity session in our Recovery Academy prospectus. This has been set up in relation to feedback from transgender service users and has been co-designed with those with lived experience. Additionally, work has been carried out to ensure our clinical recording systems accurately reflect gender and we have introduced ‘non-binary’ as an option.

Race
During 2018, GMMH has gone from strength to strength in its development of an inclusive staff network. Significant progress has been made in forming a BAME network and leadership programme.

Age
GMMH provides a number of age related services. During 2018, GMMH acquired Bolton Child and Adolescent Mental Health Community Services. This service is for five to eighteen year olds and works with GPs, hospitals and other professionals, such as teachers, to assess, treat and support young people and children, and provide support to their parents or carers.
Sexual orientation
GMMH is proud to be part of Stonewalls Diversity Champions Programme and is making active steps to develop a LGBT staff network. As a Proud Employer, GMMH attends many of the local Gay Pride events over the summer months to demonstrate how we are a LGBT-friendly employer and a Diversity Champion NHS Trust.

Sex
All of GMMH’s inpatient services now provide single sex accommodation or single sex areas and these standards are monitored on a monthly basis.
Developing our strategy – consultation feedback

In developing this strategy, it was essential we engaged and involved our staff, service users and carers to identify the priority areas for development and flag gaps and concerns with our current services.

We received responses from 621 staff members who completed an online equality, diversity and inclusion survey. These results have provided a rich insight into how staff feel about how services are being provided and what needs to be done to ensure a fairer and more equal organisation. This feedback has been taken into account when developing this strategy.

Here are some of the highlights of what GMMH staff said about our organisation;

- 76% of staff agreed that our services were accessible to all service users
- 80% of staff felt our services provide personalised care to all service users
- 74% of staff said GMMH provides inclusive career progression
- 89% of staff generally feel that GMMH supports all staff.

However, 25% of staff recognised more is needed to be done for service users with disabilities and for those staff who reported that they had felt disadvantaged and held back, the majority cited the reason for this was due to their gender or race.

Additionally, a number of staff reported that they are carers outside of work and highlighted this can sometimes have a negative impact to how they are treated in work. The Trust Carer Lead has ensured this priority has been included in GMMH’s Carers, Family and Friends Strategy 2018-2021 and has contributed to Greater Manchester Carers in Employment Delivery Group. The Trust Carer Lead has worked with Greater Manchester Health and Social Care Partnership to develop a Working Carer Toolkit for Employers. The toolkit is a best practice guide to help all Greater Manchester employers support their working carers.

Below is a word cloud of the words most frequently used by staff in the free text section of the online equality, diversity and inclusion survey.
During NHS Equality and Diversity Week (May 2018), the Trust’s Equality Leads visited services to consult with approximately 50 service users and 35 staff to develop the priorities within the strategy. Here are some of the issues services users and staff highlighted;

- Interpreters did not always attend on time.
- Disabled facilities were not fit for purpose. Two service users reported there were not enough ramps for wheelchair access and the disabled bathrooms/equipment were not suitable.
- The multi-faith facilities were poor; however, all agreed they had good access to chaplaincy services.
- Staff reported they did not feel confident providing services to transgender service users and requested more education and guidance.

In general, service users did not report any health inequalities, nor did they feel disadvantaged in any way due to any of their protected characteristics. However, it was noted, group discussions may not always be suitable to stimulate discussions surrounding some of the related issues, therefore service users were offered one to one time to discuss issues.

To consult fully on the strategy, other organisations, external providers and GMMH professional staff groups were consulted, these included; Manchester Clinical Commissioning Group, Greater Manchester Equality, Diversity and Inclusion Leads, GMMH Ward Managers Network, Matrons, GMMH Equality and Diversity Leads, LGBT Foundation, GM Healthwatch’s, GMMH BAME staff network and local service user groups.

In addition to the above, the development of the Workforce Strategy and the Workforce Race Equality Scheme provided further opportunity for staff to contribute ideas and inform the action plans.
Our priorities for the future

The Equality, Diversity and Inclusion Strategy has been developed based on the feedback from staff, service users and other stakeholders and shaped by the equality duties and data reviewed for our service user and workforce populations.

Five Priority areas have been agreed as follows:
Equality, Diversity and Inclusion Strategy

**PRIORITY AREA 1**
Improve service user access and experience

**PRIORITY AREA 2**
Better health outcomes

**PRIORITY AREA 3**
Representative and supported workforce

**PRIORITY AREA 4**

**PRIORITY AREA 5**
Culture change and mainstreaming equality, diversity and inclusion
We want to ensure our services are accessible to all service users and carers who require care and treatment. We want to ensure the information we provide can be adapted to meet individual needs.

Applying our Trust values, we strive to provide personalised and compassionate care whilst respecting different people’s needs, aspirations and priorities. We aim to ensure service users and carers have a positive experience of our services and are not disadvantaged in any way.

We are committed in ensuring our services are accessible, however recognise the processes to flag health inequalities need to be strengthened and suitably governed. GMMH has developed recording and monitoring systems and has implemented the Accessible Information Standard into practice, yet identify additional areas of application are required.

There is strong evidence that providing personalised, person centre care is fundamental to ensuring service users have a positive experience of care and better health outcomes (Health and Social Care Act 2012, NICE 2011). GMMH has committed to improving the involvement of service users and carers in care planning to ensure personalisation and these pledges are evident in the Trust’s Service User Engagement Strategy (2018-2021), Carers, Family and Friends Strategy (2018-2021) and 2018/19 Quality Account.
What we will do

• Ensure our staff can access up to date guidance and support when providing care for service users with specific protected characteristics (for example information about cultural awareness, religious beliefs).

• Develop transgender guidance to support service users and guide staff.

• Work with our estates department to ensure access and adaptations are routinely considered when building or opening new services (including autism, dementia and learning disability).

• Build into current audits and frameworks the assessment of the environment in relation to accessibility and disability compatibility.

• GMMH will continue to monitor the protected characteristics of people who have concerns or complaints about our services and ensure any trends or concerns are escalated accordingly.

• Provide service users and carers who may have specific communication needs, information in an easy and accessible format.

• Ensure the Trust’s Care Program Approach policy and frameworks support service users with protected characteristics.

• Deliver care-planning training to all clinical staff that includes providing person centred care.

• Develop a GMMH Spiritual Wellbeing Strategy. This will identify priority areas such as access to chaplaincy and ensuring that the appropriate facilities are available.

• Expand our service user engagement and peer mentorship opportunities to reach diverse communities and ensure those who engage with the Trust are monitored in relation to their protected characteristics.

• Monitor service user and carer protected characteristics when analysing satisfaction with care and treatment.
Better Health Outcomes

We want to identify where there are health inequalities in our services and have systems in place to tackle these in an open and transparent way. We want to ensure inequalities are flagged and transformed into improvement measures, which are evident in service business planning and captured via the Trust’s Equality and Diversity work streams.

On a personal level, we aim to ensure all of our service users are supported to achieve their health and wellbeing goals. We want to empower our service users, who at times in society may struggle to have their voices heard, and provide them with choices, effective advocacy, compassion and enable them to take control of their care and treatment.

In January 2017, after the acquisition of Manchester Mental Health and Social Care NHS Trust, our organisation became Greater Manchester Mental Health NHS Foundation Trust. The merge of two organisations has had an obvious impact on Trust wide structures and considerable work has taken place to align policies and harmonise systems. This has included all equality and diversity work streams and processes to enable us to monitor local health inequalities. Defining what local health inequalities are and how they influence local business plans will be our new organisation’s priority.

Despite our organisational re-structures, GMMH continues to be a main provider of highly specialised mental health and substance misuse services across the north west of England. We are proud to deliver these services and continue to adapt our services to ensure those who may struggle to access our services are able to do so. GMMH is a key player in Greater Manchester’s Homelessness Strategy and provides a dedicated homelessness team and pathway to support service users to access our services.
What we will do

• Ensure our services are commissioned and delivered in relation to local health needs and there are systems in place to support this.

• Develop a program whereby Business Managers and Equality Leads can access Equality Impact Assessment (EIA) training and GMMH has a system in place to ensure EIA’s are integral to tenders, policies and service developments.

• Ensure, when our service users transition from one service to another, that there are clear processes in place and everyone is well informed.

• Provide a Trust-wide governance framework for access to interpreters and establish systems to monitor their effectiveness.

• Improve the recording of disability in electronic records and introduce methods to flag certain disabilities.

• Ensure there are systems in place to monitor the protected characteristics of inpatients who experience restrictive practices and ensure any inequalities are immediately flagged and addressed.

• Continue to embed good practice and monitor against national frameworks i.e. Greenlight Toolkit and NHS Improvement Learning Disability Standards.

• Support GMMH’s Autism Strategy and monitor its progress in the Equality, Diversity and Inclusion Trust Committee.
Representative and supported workforce

Developing an inclusive and diverse workforce is a key strand within our Workforce Strategy. We want to create an environment that embraces diversity and promotes inclusion. We recognise the importance of providing a safe and caring environment for staff where they can be themselves in work. Ensuring we develop an inclusive organisation with a diverse workforce representative of the communities we serve is critical to achieving this ambition.

We want to create a culture than welcomes people with a learning disability by removing barriers and increase the employment of people with a learning disability being employed by our Trust.

Analysis of our current workforce demonstrates there are areas of under-representation within certain groups of our workforce. These include: younger people (aged 25 and under) lower number of BAME staff compared to the GM population, lower number of male staff as a proportion of the overall workforce and BAME and female staff in senior roles.

The gender pay gap report demonstrates that female staff are paid 5.04% less than male staff (median) and that the ratio of female staff compared to male staff reduces in higher banded roles.

We have established a BAME staff network to shape future strategies and help address areas of inequality. To develop our BAME staff members to move into senior leadership roles, we have commenced our Opening Opportunities programme and will continue to work with the network to implement our WRES actions.

Our commitment to supporting our LGBT workforce drove forward our commitment to becoming a Stonewall Employer and we continue to review our practices and policies to promote inclusion. We are also engaged in supporting younger people into employment through our pathways into employment and innovative work with schools and colleges to make mental health a career aspiration for younger people.
What we will do

- Offer targeted leadership and development support for BAME and female staff to increase the number of staff within middle and senior manager roles.

- Demonstrate whole time equivalent improvements for representation of BAME staff across all front line leader and senior leader roles by a minimum of 10% overall by 2021/22 with a stretch target of 15%. Individual trajectory targets will be set for senior, middle and junior leaders, across different leadership roles following baseline assessments for each of those roles.

- Further develop our talent management strategy to ensure increased opportunities for underrepresented groups.

- Support the sustainability of the staff networks across the Trust and enable virtual networks as appropriate to help people connect and strengthen their collective voice to influence and inform inclusion and equality work.

- Continue to meet the WRES requirements.

- Embed WDES (Workforce Disability Equality Standard) within our equalities work.

- Fully embed Disability Passports and Carer Passports.

- Meet our MINDFUL Employer, Dying to Work charter, Stonewall Diversity Champions and Disability Confident commitments.

- Support our staff who have caring responsibilities.

- Involve BAME network in reviewing our recruitment process e.g BAME staff to be involved for interview panels for roles with under-representation.

- Aim to maintain equal gender representation at Board level.

- Promote diversity and encourage applications for Clinical Excellence Awards from all groups.

- Widening our participation and community engagement activities such as work placement, work experience, pre-employment opportunities and further develop our community links.

- Increase the range of channels advertising opportunities to reach a more diverse group of people and increase awareness of GMMH.

- Promote mental health career opportunities to schools and colleges with a particular emphasis on attracting and encouraging males into the workforce.

- Work with partner organisations to review and enhance our processes to support and increase the number of people with a learning disability working within GMMH.

- Include equality, diversity and inclusion as essential areas in all management and leadership development programmes.

- Revise our mandatory equality training.

- Develop a programme of work aimed at reducing incidents of violence, aggression and discrimination towards BAME staff by service users.
Inclusive Leadership

We want our workforce to demonstrate compassionate and inclusive leadership. Compassionate leaders play close attention to the people we lead, understand the situations they face, respond empathetically and take thoughtful and appropriate action to help.

Inclusive leadership is demonstrated by leaders who are aware of their own biases and preferences, actively seek out and consider different views and perspectives to inform better decision-making.

Our leaders will see diverse talents as a source of competitive advantage and inspire people to drive organisational and individual performance towards a shared vision. We recognise that staff from under-represented groups may need more support to help them to become leaders and achieve their potential.

We have been reviewing our leadership programmes to embed the skills and knowledge required to promote an inclusive workplace and to recognise and value diversity.

What we will do

- Develop a culture of coaching and mentoring - train a cohort of internal coaches and create a formal coaching network for staff to access, with priority given to BAME staff.
- Promote and increase access to the North West Mentoring Scheme, and other similar offers that exist across the Health and Social Care Partnership.
- Embed coaching skills within all formal leadership programmes to enable coaching conversations to take place as standard.
- Develop a formal values based Leadership Development Programme with compassionate and inclusive leadership qualities embedded throughout.
- Provide bespoke and targeted leadership development opportunities for our:
  - BAME workforce;
  - Disabled workforce; and
  - LGBT workforce.
Culture change and mainstreaming equality, diversity and inclusion

We will create a culture where staff feel valued and recognised for their important and individual contributions. We will promote an environment where health inequalities can be identified in a safe and transparent way and for the organisation to learn and improve as a result.

We want the entire organisation, when making decisions, to consider how inclusive these decisions are and make the necessary steps to improve equality for everyone affected.

It is established, through equality monitoring, that there remains health and workforce inequalities. This is not only a GMMH picture, but also a national one. This strategy will make steps to improve equal opportunities, inclusion, diversity, access and experience of our service users and workforce, yet this work cannot be carried out in isolation.

To have a positive influence on culture, we need everyone to sign up to our Trust values and actively listen to what our service users and staff say about their experiences as well as make steps to make things better.

Our Trust Board has made a pledge to prioritise this strategy and provide its necessary platform in the organisation to achieve the goals identified.

We have started to monitor and expand our service user and volunteering engagement scheme, which will reach out to more diverse communities to enable true representation of our service user populations.

What we will do

• Ensure we learn from those who may have been treated inequitably and involve them in areas for improvement.
• Ensure all leaders are aware of their responsibilities regarding equality and diversity.
• Develop mechanisms to identify and share good practice.
• Support the GMMH Communications Strategy and ensure all protected characteristics have been considered when setting Trust priorities.
• Work with our communications department, ensuring all Trust images and branding are diverse and representative of the communities we serve.
• Identify a champion at the Trust Board.
• Ensure equality, diversity and inclusion is an agenda item for all service Senior Leadership Meetings.
• Ensure services have diverse networks to consult and engage with.
Monitoring the implementation of this strategy

As a result of this strategy, a corporate action plan will be developed along with local service action plans. Progress against all of these plans will be monitored via the Trust’s Equality and Diversity Committee and the Workforce Equality Group.

The Workforce Group will also be responsible for monitoring the WRES Action Plan and reporting progress to the Workforce Strategy Group.

A quarterly progress report will be produced for the Trust’s Quality Governance Committee. Local leads will monitor local progress via their local Senior Leadership Team meetings.

We will review our current corporate equality objectives, aligning them to this strategy, and reporting against these in our future annual equality reports.

We want our inclusive and equality networks to monitor our progress against this strategy and become our critical friends.
References

3. Health and Social Care Act (2012)
5. GMMH Care Programme Approach Policy
6. GMMH Carer, Family and Friends Strategy 2018-2021
7. GMMH Service User Engagement Strategy 2018-2021
8. NICE (2011) Service user experience in adult mental health - improving the experience of care for people using adult mental health services.
Priority area 5
This information can be provided in different languages, Braille, large print, interpretations, text only and audio formats on request.
Telephone: 0161 358 1644
Email: communications@gmmh.nhs.uk