



York and Scarborough Teaching Hospitals

NHS Foundation Trust

Public Sector Equality Duty Annual Report - Patient Equality, Diversity and Inclusion April 2020 – June 2022

Summary

This report is intended to summarise the current position against our equality objectives. This report outlines progress, changes and limitations during the period 2020-2022, against the backdrop of the COVID-19 pandemic. It also begins to identify a number of key priorities and areas for review and development during 2022-23.



Our Commitment to Patient Equality and Diversity

York and Scarborough Teaching Hospital NHS Foundation Trust is dedicated to encouraging a supportive and inclusive culture where all our patients can receive high quality, person-centred healthcare which meets their needs. It is within our best interest to promote diversity and eliminate discrimination amongst our workforce, in the development of services and our hospital environments.

We are committed to promoting equality, diversity and human rights for all our patients, visitors and staff and ensuring we provide compassionate care for all, with no less favourable facilities or treatment on the grounds of age, disability, race or ethnicity, sex, gender re-assignment or identity, marriage and civil partnership, pregnancy and maternity, religion or belief, or sexual orientation.

We are opposed to all forms of unlawful and unfair discrimination and we will ensure that all patients are treated fairly and with respect. York and Scarborough Teaching Hospitals NHS Foundation Trust commits to:

- ✓ being an organisation that is welcoming to all,
- ✓ not tolerating any forms of discrimination and will challenge it wherever we see it, ensuring that equality, diversity and inclusion is everybody's business,
- ✓ ensuring that there are no barriers to accessing our services,
- ✓ engaging with our communities, in a bid to ensure we meet the needs of the people who use our services.
- ✓ listening to our users, particularly those from "seldom heard" groups in our community (for example, the travelling community and people with learning disabilities),
- ✓ developing initiatives which help our staff to understand and support one another for the benefit of patients in our care, and
- ✓ working with partner organisations to reduce inequality within our local area as part of the Humber and North Yorkshire Integrated Care Partnership



Heather McNair
Chief Nurse



Jim Taylor
Medical Director



Simon Morritt
Chief Executive

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1. Equality Objectives 2020-24

1.1. Our Objectives and workstreams

In April 2020, the trust identified three patient equality objectives for the next four years and these were set out in our previous annual report (2019-2020):

Objective 1

To engage with patients, carers, governors, and local stakeholders and organisations, including [Humber and North Yorkshire Integrated Care Partnership](#) and Healthwatch, to listen and understand the needs of our patients.

Objective 2

To engage internally with services to discuss the needs of patients to ensure the reduction in health inequalities, that discrimination is eliminated, and patients and staff are supported with appropriate tools.

Objective 3

To achieve compliance with the Accessible Information Standard 2016

There are three workstreams to support our approach, each with a responsible executive director and operational lead:

Work stream	Executive Director	Operational Lead
Patient Equality	Chief Nurse	Patient Equality and Diversity Lead
Built Environment	Chief Nurse	Access Adviser for Inclusive Built Environment
Workforce	Director of Workforce and Organisational Development	Care Group 3 Workforce Lead and, HR Business Partner *

* From late 2022 it is intended this workstream will be led by the new Head of Equality, Diversity and Inclusion, who will also be the strategic lead for the trust's equality work, overall.

Some of this work is also supported by the trust's Patient and Public Involvement Lead.

2. Performance April 2020 - June 2022

This report is intended to summarise the current position against our objectives and to indicate changes and priorities for 2022-23.

2.1 Overview and context

During 2020-22 some work was started towards these objectives in several key new areas. Unfortunately, due to the COVID-19 pandemic some progress has been limited and work in some areas necessarily paused until 2022. In line with national expectations, no annual report was prepared in 2020-21 and work on the Equality Delivery System was also paused. During this period, many staff were redeployed and seconded to support the changing demands of the pandemic. This has also meant that the Patient Equality Lead and the Patient Involvement Lead posts have been vacant for some months and specific work has been limited.

However, work has continued where possible, including in the patient equality, built environment and workforce workstreams. Workforce equality and diversity work is covered in separate [workforce equality reports](#). Patient equality and built environment work is covered in this report.

During 2021-22, as services began the recovery process, the Trust took the opportunity to carry out a number of key actions to support future delivery of our equality objectives. This has included;

- Formal review of the trust *Fairness Forum* with input from a range of key stakeholders – this helped identify priorities to share with the trust board.
- Trust board development session facilitated by Deputy Chief Nurse and workforce / access equality leads to present patient and staff experiences and current challenges. This led to;
- The Trust Chief Executive becoming Chair of the Fairness Forum and board members each making an individual pledge to support and champion the wider equality, diversity, inclusion agenda;
- Creation of a new Head of Equality, Diversity, Inclusion role for the trust and recruitment to the Patient Equality, Diversity and Inclusion Lead and Patient and Public Involvement Lead posts, to cover vacancies due to secondments (all due to start summer 2022);

- Commissioning of an External Review of the current equality, diversity and inclusion arrangements in relation to meeting our public sector duties. The review report and recommendations were received by the Fairness Forum in July 2022, with an initial action plan;
- Securing funding for three new roles to start in Summer 2022 in the Safeguarding team to support identified areas;
 - An Autism Service Lead - to develop support for autistic people and training for staff and;
 - Two Mental Capacity Advisors – two posts to support patients and staff with capacity assessments and decisions.

Together, these actions will strengthen resources and governance structures for patient equality and diversity work across the trust.

2.2 Progress against Equality Objectives 2020-2024

Below is a summary of progress towards our equality objectives, with actions completed to end of June 2022.

Where activity has been paused or changed due to the pandemic, our intention is to review and restart during the second half of 2022, following the external review and appointment of key personnel. We aim to align our equality priorities with key strategic objectives and future changes. We anticipate that Equality Impact Assessments, Quality Improvement projects, (and a refreshed approach to the Equality Delivery System) will likely be a key tool for embedding many of the equality objective actions, into our future ways of working.

During 2022-23, we plan to align reporting of progress against our patient equality objectives with our reporting on workforce equality, in a single report.

Objective 1: To engage with patients, carers, governors, and local stakeholders and organisations (including Humber and North Yorkshire Integrated Care Partnership and Healthwatch), to listen and understand the needs of our patients.

During 2020-22 our work towards this objective has included:

- ✓ Continuing to engage with stakeholder groups, such as Healthwatch North Yorkshire, Healthwatch York, Scarborough Disability Action Group, Healthwatch East Yorkshire to listen to feedback provided by patients and services users, to help understand how to shape our services (ongoing).
- ✓ Reviewing the reports published by Healthwatch partners on services in respect of equality and diversity and develop action plans to address, as far as practicable the concerns identified (ongoing).
- ✓ Engaging with our patients across the protected characteristics to understand their needs and concerns and engage with them on service developments and improvements. This has included support for complaints investigation where there is an equality and diversity or, accessible information standard concern.
- ✓ The trust Access Adviser continues to engage with disabled peoples' organisations, carry out access audits, and provide advice to capital planning and minor works teams on all new build development to address our accessibility and inclusivity needs (ongoing).

Actions for review/restart in 2022-24:

- Reviewing feedback provided from the inpatient surveys to identify any themes for equality and diversity improvements and take action on these.
- Engaging with Humber and North Yorkshire Integrated Care Partnership colleagues in the local area on shared actions for improvement.
- Working with partner organisations and the LGBTQ+ community, to develop appropriate processes to ensure that the health records of the transgender community are appropriately maintained, reflecting the wishes of the patient (paused due to pandemic).
- Working with our Facilities Management Compliance team on the process for Patient-led Assessments of the Care Environment (PLACE) assessments to ensure appropriate involvement and engagement of our patient and service users and respond to the outcomes of the assessments to deliver quality improvement (paused due to pandemic).
- Support the analysis of patient feedback to understand the experiences of people with different protected characteristics and identify areas for improvement.
- Working with patient groups/advocates to ensure that a wide range of communities have the opportunity to inform our service development and

help us understand how and what we can do differently to make a difference (paused due to pandemic).

- Working with patient groups, develop the arrangements to introduce the Hidden Disabilities Sunflower Lanyard Scheme to the trust, to provide support to patients with hidden disabilities. (Paused due to pandemic).
- Exploring the feasibility of the trust signing up to the *Safe Places Initiative*, where organisations agree to provide a safe and supportive space if someone who is vulnerable asks for help. (National programme paused due to pandemic – due for restart).

Objective 2: To engage internally with services to discuss the needs of patients to ensure the reduction in health inequalities, that discrimination is eliminated, people are treated with compassion and patients and staff are supported with appropriate tools.

During 2020-22 our work towards this objective has included:

- ✓ Work to review and strengthen the trust's Fairness Forum meetings, with the Chief Executive becoming Chair and commissioning an external review. With representation from across care groups, governors and non-clinical services, this group oversees progress on our objectives. (ongoing, for review)
- ✓ The trust has also continued work with *AccessAble* and York Hospital Charity to publish access guides for staff, visitors, and patients for our hospitals at Malton Community Hospital, and New Selby War Memorial Hospital and York Hospital, to add to the guides developed for the Scarborough Hospital site in 2019-20. *AccessAble* is a web-based directory of venues which provides photos and detailed information about physical access facilities, to enable people with access needs to plan a visit.
- ✓ Improving access to ablution facilities for patients and staff of differing faiths - work completed at Scarborough hospital and capital and charity funds identified for similar improvements at York hospital (planned for Nov 2022).
- ✓ Work has been completed to install a Changing Places toilet on the Scarborough hospital site (June 2022)
- ✓ Ongoing improvements to physical design or features to improve accessibility including;

- Ensuring sufficient hearing loops and wheelchairs are available across the trust premises to support our patients' needs
- Dementia-friendly refurbishment work on Chestnut Ward at Scarborough Hospital site and a dementia-friendly environment audit in the Emergency Department at York.
- Improvements to access at entrances at Scarborough Hospital including North entrance, X-ray entrance and occupational health department, for example new ramp and steps added.
- The accessible toilet facilities at main reception at York hospital have been refurbished (with York Wheels).
- At Scarborough and Bridlington, improvements have been made to access for the Blue Badge accessible parking bays and to create additional parking spaces.
- Following feedback from disabled people's organisations, we have improved road access at York hospital by removing some traffic calming measures at South entrance to provide a level surface.
- At York Hospital, improvements have been made to improve visual contrast and accessible features for toilet facilities in the Neurosciences Department, to better meet the complex needs of these patients.
- ✓ Continuing the work of the *Dementia Improvement Group* - supporting dementia awareness week across hospital sites and delivering our dementia strategy implementation plan to better support people living with dementia and their families and carers.
- ✓ Establishing a new *Learning Disability and Autism Steering Group* which in time will have oversight of our developing work on supporting autistic people (and recognise where the needs of autistic people and people with a learning disability are separate).
- ✓ Establishing the *Mental Health working group*, with a strategy and action plan in development.

Actions for review / restart in 2022-24:

- Introducing a policy for assistance dogs across the trust, which recognises and supports the valuable contribution assistance dogs provide for their owners to lead independent lives. We developed a draft policy for assistance dogs within trust premises during 2020, which was paused due to the pandemic, before completion - to be finalised during 2022.

- Reviewing patient experience and patient safety information which relate to equality and diversity issues to understand the circumstances, identify improvements, and share best practice (Ongoing, for review)
- Exploring the development of 'Patient Equality Champions' across our hospital care groups and LLP to help drive the agenda (not started, for review).
- Working across services to promote health screening for seldom-heard or under-served patient groups (ongoing, for review).
- Promoting the trust as an organisation that respects the rights of parents to breastfeed their children within our open spaces, should they choose to do so (ongoing).
- Developing appropriate systems to ensure that a patient's identification details match their gender identity (started and paused).
- Ensuring that our workforce is educated about the needs of our patients living with dementia, d/Deaf people, autistic people, people with visual impairment or other sensory or learning disabilities or communication needs. Learning from patients with lived experience to help improve staff education and awareness (started and paused – also links to objective 3).
- Ensuring that our patients are supported irrespective of their marital or civil partnership status and their partners are afforded the same respect, care and compassion.
- Improving access to appropriate menu choices for patients of differing faiths.
- Providing a safe place for patients to be open with us about their gender identity.
- Increasing awareness and understanding of the health needs of the LGBTQ+ community.
- Ensuring that LGBTQ+ patients/people feel safe in our environment and feel safe to be open with us, without fear of victimisation, harassment or bullying.
- Introducing a system for patients to feel confident to share information about sexual orientation with us on a voluntary basis, to help us carry out equality monitoring, in line with national standards.
- Discussions with local partner organisations began during 2019/20 on supporting transgender men and women when accessing health services to ensure that health records presented their acquired, rather than their assigned at birth identity. We suspended this work in March 2020 due to the pandemic.

- Ensuring that hospital passports for people with a learning disability (which help staff understand people's individual needs), are stored and appropriately accessible on the hospital electronic patient record system. More than 1000 passports are now uploaded into the system. Work continues to make these and other types of passports more accessible to staff.
- Working to move closer to having access to specialised Learning Disability teams seven days a week across our York and Scarborough sites. From having a single staff member split between the two sites (before 2020), this has increased to 3 days per week of Learning Disability Liaison Nurse support at each of the York and Scarborough hospitals sites, plus 6 hours of learning disability support assistant time on each site. Support from the team is now also spread more evenly throughout the week, which is more effective. Planning is underway to further increase the service to 4 days per week from September 2022.
- Continuing to improve access to hospital buildings and services, in line with our Access Strategy and Plan. Reviewing the trust's Equality Impact Assessment process to ensure that it remains robust and is implemented across all services (to ensure it meets our legal obligations and supports service improvement).
- Providing an advice and support service to colleagues reviewing policies, procedures, guidance to consider equality, diversity and inclusion.
- Working with LLP colleagues to create a physical environment that meets the needs of our patients with impairments, such as dementia and learning disabilities.

Objective 3: To achieve compliance with the Accessible Information Standard 2016

During 2020-21 our work towards this objective has included:

- ✓ Implementing our Accessible Information policy that seeks to ensure that all patients with a disability, impairment or sensory loss have the appropriate written and communication support to understand and consent to the healthcare being provided to them and can be supported in making decisions about their care including informed consent.
- ✓ Engaging with patients to improve the range and access to patient information in appropriate formats, which meet their needs. (ongoing).

- ✓ Improving the range and access to interpretation services for patients, including British Sign Language (BSL) and spoken language support. A remote British Sign Language service started in 2020 to provide access to an interpreter 24 hours a day, 7 days a week via a video link. Four digital tablets were made available to support this, across our two main hospital sites. Plans to roll-out further tablets to support video interpreting in relation to spoken languages also, were paused during 2020-21 and will be reviewed as part of our work to support accessible communication. We recognise this is a key area for further development, to improve access across services during 2022.

Actions for review / restart in 2022-24:

- Expanding staff training resources and access to the tools. Continuing to increase staff awareness and skills to support accessible communication and information by expanding the training resources and, access to the tools and support available is a key priority for 2022-24 (work started and paused due to pandemic).
- Ensuring that hospital appointment letters are clear, relevant, and available in a range of formats. Letters should tell patients how to inform the trust about their written and verbal communication needs and how to request information in different formats (work started and paused due to pandemic).
- Working with colleagues within Systems and Network services to develop and improve effective capture and flagging of patient communication needs. This includes improving how we meet people's needs when we provide letters and written information.
- Producing revised guidance on written patient information to ensure that any patient information produced is inclusive, meets our patients' needs, and is available in a range of formats, both online and in hard copy.
- Exploring opportunities for using appropriate technology to improve patient access to patient information.
- Improving the availability of information in an *Easy Read* format.
- Working towards the requirements outlined in the Website Content Accessibility guidelines autumn 2020 - currently partially compliant and working towards full compliance, as per our [accessibility statement](#).

- Monitoring the performance of our interpreting, translation and transcription services, including for British Sign Language (BSL) and spoken languages due for review and restart in 2022.

2.3 Equality Delivery System

The Equality Delivery System, known as the EDS was commissioned by the national Equality and Diversity Council in 2010 and launched in July 2011. It is a system that helps NHS organisations improve the services they provide for their local communities and provide better working environments, free of discrimination, for those who work in the NHS, whilst complying with the Equality Act 2010.

In line with national expectations, work on the Equality Delivery System was paused across the NHS in 2020-21 due to the pandemic. An updated version of the Equality Delivery System with a revised range of standards and future expectations is due to be published in Summer 2022, with a revised range of standards.

Our external review in Summer 2022 will help us refresh our approach to EDS from 2023, in line with local system partners and national expectations.

3. Patient and Public Engagement

3.1 Partnership working

During 2020-2022, the Trust has continued to engage with the following organisations where possible, to understand further the needs of patients across the protected characteristics:

- York Human Rights City Network
- Scarborough Disability Action Group
- York Disability Rights Forum
- Healthwatch York
- Healthwatch North Yorkshire
- York Dementia Action Alliance
- My Sight York
- York LGBTQ Forum

Colleagues from Healthwatch have supported us by attending trust Fairness Forum meetings and sharing feedback on equality and diversity themes.

The Patient Equality and Diversity Lead and Access Adviser have continued to listen to the views of patients and partner organisations to support the needs of our patients.

Thank you to all our partners who have supported us during this time.

3.2 Patient Complaints

During 2020-2021 and the peak period of the COVID-19 pandemic, the Trust received 11 complaints and 3 concerns from patients and families which were recorded as complaints or concerns about inequality or discrimination. This was higher than in previous years with 7 such complaints or concerns received in 2019.

Of these, 10 related to disability and 1 was related to religion / faith / belief. Following investigation, 3 complaints were upheld, 3 were partially upheld and 4 were not upheld.

In addition, we also received 1 concern relating to disability (mental health), 1 relating to gender identity or reassignment, and 1 relating to age (concerns are not a formal complaint). Each of these were considered and contact was made with the individuals to resolve their concerns and identify learning.

During 2021-22, we received 6 complaints, 2 concerns and 1 enquiry from patients and families which were recorded as complaints or concerns about inequality or discrimination. This was similar to 2019, when we received 7 complaints.

Of these, 5 related to protected characteristics - 2 related to disability; 2 related to race / ethnicity; and 1 related to harassment based on sexuality and gender reassignment. Following investigation, 1 complaint was upheld, 4 were partially upheld and 1 was not upheld.

In addition, we also received 1 concern (not a formal complaint) and 1 enquiry, both related to disability, specifically people's communication needs due to sensory impairment. Each of these were considered and contact was made with the individuals to resolve their concerns and identify learning.

There was also 1 complaint and 1 concern raised about prejudice towards people affected by drug or alcohol misuse which were resolved and upheld. These issues fall outside the remit of the Equality Act 2010, however they are noted here as they help us understand the wider issue of inclusion.

During 2021-2022, the most common complaint themes overall were;

- Communication with relatives, carers, patients
- Care needs not adequately met
- Appointment availability
- Delay or failure in treatment or procedure
- Discharge arrangements

We recognise some of these themes can potentially have a greater impact on some people with protected characteristics, including people with specific communication needs and people who have lived experience of discrimination.

Accessible Information Standard Complaints

During the period of the COVID-19 pandemic, accessible communication has become an increasing area of focus. More information about our work on accessible communication is covered in Section 2.2. Objective 3.

During 2021-2022, we received 6 concerns/complaints specifically about accessible communication. This is compared with 1 complaint and 1 comment about accessibility in 2019-2020 and 1 concern and 2 enquiries in 2020-2021.

We recognise that many disabled people who have made a complaint or concern, are likely to have experienced repeated problems with accessing information in their preferred format from a variety of health and care providers.

We have processes in place to support staff in meeting patient requirements including a transcription service which can put information into a variety of formats and video tablets to support BSL interpreting. We recognise these systems are not fully embedded across all parts of our organisation.

The trust is committed to ensuring that we communicate with patients in their chosen format and accessible information continues to be a key priority in our equality objectives 2020-24.

3.4 Other public and patient involvement and engagement

We note that face-to-face patient engagement work and some analysis of patient surveys has been paused or suspended due to pandemic and staffing challenges (as per Section 2.1) and is due to review and restart in 2022-2023.

Responding to information people share with us about their lived experiences, continues to be an area for development during 2022-24.

A new role of Patient and Public Involvement Lead has been created through a restructure of the Patient Experience Team to increase the support for patient engagement and involvement in service improvement. In addition, a Patient Experience Facilitator role has been created to support front-line staff with improving the use of patient engagement and a range of feedback initiatives, including local surveys.

4. Inclusive Built Environment

The inclusive built environment agenda across our the trust has a primary objective to make our built environments more inclusive and accessible to everyone including, patients, staff and visitors.

The approach to improving the inclusive built environment is twofold and includes:

- 1 Undertaking accessibility audits of our buildings and estate. The Equality Act Code of Practice states that the completion of an Access Audit by a, “suitably qualified person” [who] will ‘help service providers to meet their obligations under the Act’
- 2 Ensuring that any refurbishment works or new building development that takes place across our sites has principles of inclusive design embedded at the start of the project and throughout the project development stages.

The age of our buildings means that much of our estate does not meet current regulatory or good practice guidance in terms of access to, and the use of, buildings for people with a range of mobility, sensory and neurological impairments. Our completed access audit reports and prioritised recommendations are used to inform our trust access plan, which provides a framework to improve improvements to the built environment. Our Patient-Led Assessments of the Care Environment (PLACE) also inform our access strategy. The PLACE assessment programme was suspended nationally during the pandemic and is due to recommence in Autumn 2022.

Access audits at the Trust have continued wherever possible and around 70 audits have been completed across our sites, during 2020-2022. This work highlights areas for action and prioritisation with the trust’s estates and capital planning teams.

However, funding constraints mean there is a significant backlog of unaddressed accessibility issues across the estate which may limit patient and carer access to care. We continue to identify a recurrent funding stream in order to progress remedial work at a greater pace.

Work has been undertaken to secure a Changing Places toilet on the Scarborough Hospital site, which is due to open in Summer 2022.

Our Built Environment Lead has also given input on accessibility into the several proposals for new developments, including the new Emergency Department developments at York and Scarborough due to open in 2023/4.

The role of the Access Advisor will change in Summer 2022. The aim is to continue this work with the LLP and Capital Planning teams to advise on environmental improvements and to focus on design appraisals for new build developments; completing access audits and delivering staff training during 2022-2023.

5. Conclusion and next steps

This report is intended to summarise the current position against the equality objectives 2020-2024. This report outlines progress, changes and limitations during this period, against the backdrop of the COVID-19 pandemic. It also identifies a number of key priorities and areas for review and development during 2022-23.

We anticipate that over the next two years to 2024, the actions set against our objectives will evolve as the needs of our patients change, services are developed and technology changes, following the pandemic.

We will align our equality priorities with key strategic objectives and future changes, including changes in our local health and care system due in 2022-23. For example looking at the opportunities for aligning our work on embedding the Accessible Information Standard, with new technologies. We anticipate that Equality Impact Assessments (and a refreshed approach to the Equality Delivery System) will likely be a key tool for embedding many of the equality objective actions, into our future ways of working.

We will continue to monitor progress against our equality objectives, via the Fairness Forum and our trust Board and we will respond to the recommendations of the external review due in Summer 2022.

5.1 Further information

For further information, questions about this report or if you require a different format, please contact:

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Appendix: our responsibilities

As an NHS healthcare provider, the NHS Constitution requires us to support our communities and wider society to reduce health inequalities and address imbalances for minority or diverse groups of people.

At the same time, it has a wider social duty to promote equality through the services it provides and to pay particular attention to groups or sections of society where health inequalities are seen in relation to access, experience and outcomes e.g. where life expectancy rates are poorer for some people with protected characteristics.

Legal and Regulatory Framework

In addition, the trust is required to meet a number of legislative and regulatory frameworks. These include:

- Human Rights Act 1998
- Mental Capacity Act 2005
- NHS Act 2006
- Autism Act 2009 and the national strategy for autistic children, young people and adults: 2021 to 2026 and statutory guidance for NHS trusts
- Equality Act 2010, including the Public Sector Equality Duties
- Health and Social Care Act 2012, 2014
- Children and Families Act 2014, Children Act 1989
- Care Act 2014
- Health, public health and social care outcomes frameworks
- CQC five key questions, framework and key lines of enquiry
- Care Act 2014
- Special Educational needs and disability (SEND) Code of practice 0-25 years 2015, Learning disability standards for NHS trusts 2018
- NHS England's long-term plan
- British Sign Language (BSL) Act 2022
- Health and Care Act 2022

Public Sector Equality Duty

Under the Equality Act 2010, all public sector bodies must abide by the Public Sector Equality Duty (PSED). The PSED has three key aims, which are to:

1. Eliminate discrimination, harassment, and victimisation
2. Advance equality of opportunity between people who share a protected characteristic and people who do not
3. Foster good relations between people who share a protected characteristic and those who do not.

The Act explains that having due regard for advancing equality involves:

- Removing or minimising disadvantages suffered by people due to their protected characteristics
- Taking steps to meet the needs of people from protected groups where these are different from the needs of other people
- Encouraging people from protected groups to participate in public life or in other activities where their participation is disproportionately low