

WEST GLOUCESTERSHIRE PRIMARY CARE TRUST

RACE EQUALITY ACTION GROUP

TERMS OF REFERENCE AND CONSTITUTION **DRAFT**

1.0 CONSTITUTION

- 1.1 The West Gloucestershire Primary Care Trust has established a group to be known as the Race Equality Action Group.

2.0 PURPOSE

- 2.1 To develop, promote and review PCT race equality policy and strategy with a view to ensuring race equality is an integral aspect of all PCT corporate policies (especially human resource policies) and health strategies, programmes and services.
- 2.2 To provide a forum for discussion of all aspects of race equality and diversity, including community cohesion, and ensure liaison with other organisations within Gloucestershire and the NHS, including the Commission for Racial Equality.
- 2.3 To ensure, on behalf of the Board that appropriate management systems and processes for promoting and monitoring race equality are in place, and that all relevant policies and procedures that give effect to this are approved, implemented and reviewed.

3.0 SCOPE OF RESPONSIBILITY

- 3.1 Ensuring that all relevant stakeholders including patients and the public are kept informed and consulted on race equality policy and practice within the Trust.
- 3.2 Ensuring that all employees, including managers and the Board are provided access to adequate information, instruction and training relating to race equality.
- 3.3 To review and if necessary prioritise recommendations/action plans based on national and SHA guidance and other relevant reviews.
- 3.4 To advise and recommend to the Board the resources necessary to ensure that the PCT itself is able to fulfill its statutory duties with respect to race equality.

4.0 OBJECTIVES

To ensure:

- 4.1 The PCT is recognizably committed to promoting race equality and good race relations and eliminating discrimination; race equality is part of the main business of the organisation at all levels and across all relevant activities; discrimination is challenged when it is identified; community cohesion is promoted internally and externally.
- 4.2 There is equitable access to services for all races and ethnic groups; appropriate health promotion and illness prevention activities are in place in response to the assessed

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health needs of local ethnic minority populations; services are experienced by all sections of the community as fair, meeting their needs, respecting their cultural identity, and providing choice; local people feel empowered to exercise the choice available.

- 4.3 All sections of the community find the complaints system transparent and straightforward to use and find their concerns appropriately addressed; outcomes of treatment are similar across all ethnic groups.
- 4.4 Local people from all ethnic groups know what is available from local health services, have similar levels of satisfaction with services and consider that services work with their needs in mind, and know about and actively use opportunities available to influence the development, delivery and monitoring of health services.
- 4.5 The PCT is knowledgeable about the health and inequalities experienced by local people of all ethnic groups; that priorities are influenced by the needs of all ethnic groups; that evidence based strategies and action plans are used to reduce inequalities; that inequalities in health experience between ethnic groups are narrowing; and premature mortality and excess infant mortality in certain ethnic minority groups is reducing.
- 4.6 Staff of all ethnic backgrounds experience the organisation as a fair and rewarding place to work and want to stay; staff in all services, directorates and partnerships actively promote race equality and good race relations in their work and are confident in their ability to challenge racism; staff reflect the community they serve at all levels in the organisation; and recruitment rounds lead to ethnic minority candidates gaining jobs at all levels and in all areas of the trust's activities.
- 4.7 Local and other partners recognize the PCT as a champion for race equality in all its activities, and it successfully exercises its influence outside its direct partnership activities to challenge racism and promote race equality and community cohesion.
- 4.8 The PCT invests to promote racial equality and good race relations and ensures contractors comply with their responsibilities under the RRAA (Race Relations Amendment Act).
- 4.9 The PCT compares the ethnic profile of its users with that of the local population; documents progress on narrowing the disparity between ethnic groups in all relevant aspects of its business; maximises opportunities for staff to access information to support their work.

5.0 MEMBERSHIP

5.1 The Race Equality Action Group will consist of the following:

- Director of Public Health (designated Executive Director with Board responsibility for race equality)
- Nominee of Director of Service Delivery
- Nominee of the Director of Clinical Development
- Nominee of Director of Finance
- Nominee of Director of Human Resources
- Nominee of Director of Performance and Corporate Development

Other representatives may be co-opted as appropriate. Co-opted members to include representatives of primary care, service users, and partner organisations.

5.2 The Chair of the Race Equality Action Group is the Non-Executive Director with Board responsibility for race equality.

6.0 ACCOUNTABILITY

6.1 The Group is accountable to the Board of the PCT.

7.0 FREQUENCY OF MEETINGS

7.1 The Group shall meet at least every three months.

8.0 AGENDA ITEMS

8.1 Agenda items should be submitted 10 days in advance of the meeting to the Chair of the Group.

9.0 REPORTING

9.1 The Board will receive bi-annual reports on the activities of the Group, progress made against identified action plans and the status of PCT race equality. One of the bi-annual reports will take the form of an annual report to the Board.

10.0 COMMUNICATION

10.1 In order to ensure effective communication the designated Executive Director with Board responsibility for race equality will act as the central point of contact for the Group.

11.0 REVIEW

11.1 These terms of reference will be reviewed annually following initial endorsement.