Disability Equality Scheme

Ability counts
Disability Equality Scheme

*Ability counts*

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As the largest trade union and professional association for nursing and health care support workers in the world, the RCN has a substantial role to play in promoting an approach that values diversity and fully implements equality of opportunity role as a service provider, employer and corporate citizen.

The RCN strives to ensure that our members and our staff are protected from all forms of harassment and discrimination at work. Moreover, we recognise the negative impact that discrimination has on nurses and every member of the health care team and the consequences of these patterns of behaviour on patient care and health equality outcomes. According to the World Health Organisation “Overt or implicit discrimination – violates one of the fundamental principles of human rights and often lies at the root of poor health status.”

We seek to ensure that our members can carry out their duties in environments that are free from discrimination and harassment so that they are given every opportunity to use their skills and experiences to the benefit of patient care. The RCN has significant discretion to promote equality of opportunity through its collective bargaining agreements and will therefore continue to diligently campaign on behalf of members on these issues.

The Royal College of Nursing has made considerable progress over the last five years in working toward removing the barriers to health equalities.

Our Disability Equality Scheme will consolidate that work and provide a cohesive framework which will enable us to more effectively advocate on behalf of our members who have or acquire a disability during the course of their professional careers.

Through this strategy, we aim to remove barriers to participation in the activities of the RCN by members with a disability. We also aim to ensure that we

demonstrate excellence in our own employment and recruitment practices to ensure that our staff and potential staff members are confident that are able to operate at the highest levels of their ability within the employ of the Royal College of Nursing. Ultimately, these changes can only work to improve patient care.

We will work to ensure that when we deliver services to members, respond to consultations and run our campaigns we are clear about the diverse needs of RCN members with a disability and are focussed on meeting them.

Peter Carter
RCN General Secretary

Foreword

Dr Peter Carter OBE
Royal College of Nursing General Secretary

DISABILITY EQUALITY SCHEME
Our Disability Equality Scheme outlines how the Royal College of Nursing of the United Kingdom (RCN) intends to meet the requirements of the Disability Discrimination Act 2005.

As part of our commitment to valuing diversity and implementing equality of opportunity, we have voluntarily placed ourselves under the obligations created by the Disability Discrimination Act 2005. We recognise that we have a responsibility to comply with and achieve the highest possible standards of practice in relation to diversity and equality.

We want to do more than simply comply with legislation. We believe that as the largest professional organisation and trade union for nursing in the world, we have a moral obligation to lead decisively and proactively in championing disability equality in all areas of our day-to-day and strategic work.

This document outlines how the Royal College of Nursing intends to meet the requirements of the Disability Equality Duty and will demonstrate how such activities are entirely consistent with our core values as an organisation.

We have produced complementary schemes on gender and race which are available for download on the RCN website.

We would welcome your feedback on this scheme and invite you to email diversity.team@rcn.org.uk

Alternatively you may write to:

The Diversity and Equality Unit
20 Cavendish Square
London
W1G 0RN

Alternative formats of this document are available from the above address.

The RCN believes that diversity is about recognising the difference between people and making constructive use of those differences in the way we provide our services to members, how we behave as an employer and how we act as a corporate citizen. The RCN believes that embracing the richness of experiences, skills and talents within nursing helps deliver better patient care and better health outcomes for the UK’s diverse communities.

As we continue to develop our services to meet the varied needs of our members, we strive to provide resources that are relevant, appropriate and responsive.

The RCN will manage its workforce in a way that makes positive use of its diversity; valuing individual experience and integrating fairness and equity into every aspect of our employment and recruitment practices. The RCN will do this by continuing to recruit, develop and retain the most competent individuals and value the skills, talents and experiences that they bring to the organisation.

More than just a trade union and employer, the RCN has a crucial role to play as a corporate citizen. This leadership role requires the RCN to champion the implementation of equality of opportunity and the benefits of valuing diversity in an ever changing society.

The RCN is committed to delivering its services and employment opportunities without discrimination on the grounds of a person’s race, disability, age, gender, religion or sexuality. We have also undertaken to ensure that those contracted to deliver services on our behalf share our ethos and implement these values.
Corporate priorities

Strategic plan

The RCN’s strategic plan sets out the key goals for the organisation until 2008.

Valuing equality and diversity was identified as an organisational priority within the Strategic Plan 2003-2008. Our aim is that in all we do we will seek to be:

- inclusive
- listening
- caring
- respectful.

The Strategic Plan outlines milestones for embedding diversity and equality within the organisation and how this will be reflected in the quality of services provided to members.

In 2005, the RCN agreed a revised Corporate Equality and Diversity Strategy and action plan as a way of fulfilling the commitments outlined in the Corporate Strategic Plan.

Summary of the corporate diversity and equality strategy

Key aims are to:

- move the RCN into a position of authoritative leadership and recognised good practice in relation to diversity and equality and achieving positive outcomes for members and for patient care
- meet legal and moral obligations under current anti-discriminatory legislation
- support and work in partnership with a range of other organisations to promote equality of opportunity and actively value diversity as a core part of the organisation’s strategic aims as well as day-to-day business management practices.

Three dimensions

The strategy focuses on the RCN as:

- a member-led trade union and professional association
- an employer, demonstrating exemplary policy and practice on diversity and equality issues
- a corporate citizen, making full use of its ability to influence other stakeholders around equality and diversity issues.

RCN functions and policies relevant to promoting disability equality

The RCN 2003–2008 Corporate Strategy outlined five themes as integral to our mission as an organisation. To ensure a high level of consistency throughout our work in this area, we used these five themes as the baseline to evaluate the policies and functions relevant to the promotion of disability equality. The five themes that formed the basis of our strategic impact assessment process are as follows:

Representing:

- the interests of nurses and nursing: to be their voice locally, nationally and internationally.

Influencing:

- lobbying governments and others to develop and implement policies that improve the quality of patient care
- building on the importance of nurses, health care support workers and nursing students to health outcomes.

Supporting and protecting:

- the value of nurses and nursing staff in all their diversity
- their terms and conditions of employment in all employment sectors
- the interests of nurses professionally.

Developing:

- educating nurses professionally and academically, building our resources of professional expertise and leadership
the science and art of nursing and its professional practice

Building:
- a member-led organisation with the capacity to deliver our mission effectively, efficiently and in accordance with our values
- the systems, attitudes and resources to offer the best possible support and development to our staff.

Assessing the impact

Our impact assessment process deemed that each one of the themes outlined above had a high impact on disability equality. We also undertook an impact assessment of the various directorate functions and devised a list of departments with either a high, medium or low impact on disability equality. Departments that have scored high on the assessment framework have accordingly been given the highest priority in terms delivering disability equality as well as the broader equalities agenda within them. The departments which were given a low impact score have conversely been given a lower priority in terms of delivering this agenda.

Whilst we recognise that all departments have a role to play, for brevity, we have included the list of departments that were assessed to have the biggest impact on disability equality:
- all English regional offices
- RCN Scotland
- RCN Northern Ireland
- RCN Wales
- employment relations department
- estates
- marketing (webteam)
- member support services
- human resources
- international
- RCN Institute
- professional nursing department
- legal
- communications.
The legal context and relevant legislation

The Disability Discrimination Act 1995 amended by the Disability Discrimination Act 2005, places a statutory General Duty on all public authorities to promote disability equality. This means that they must, in carrying out all functions, have due regard to the need to:

- eliminate unlawful discrimination
- eliminate unlawful harassment
- promote equality of opportunity between disabled persons and other persons
- take steps to take account of disabled persons’ disabilities, even where that involves treating disabled persons more favourably than other persons.

The provisions of the duty also apply to providers in the independent and voluntary and community sector where they have been commissioned to provide services on behalf of the public sector. It is important that clear mechanisms for reporting compliance against the duty are built into commissioning arrangements with new and existing providers.

What is a Disability Equality Scheme?

The Disability Discrimination Act 2005 places a number of specific statutory duties on public authorities which the Royal College of Nursing intends to assume as part of its diversity and equality leadership function. These specific duties are intended to assist public authorities in meeting the general duty, in particular by setting out what public authorities should do to plan, deliver and evaluate action to eliminate discrimination and promote equality. The core requirements are:

- the preparation and publication of a disability equality scheme
- implementation of the disability equality scheme through an action plan contained in the scheme
- report annually on progress.

The RCN’s Disability Equality Scheme meets these requirements and contributes toward our aim of promoting good equalities practice across the organisation and ensures that we will meet the needs of both our members and our employees as well as our other stakeholders. This Scheme sets out our overall objectives for improving and addressing disability inequalities and the action plans for delivering improvements to all aspects of our employment and service delivering as well as professional development functions and roles.

It will therefore help us to achieve a number of things:

- meet the requirements of the Disability Discrimination Act and set out our plans to improve disability access to employment and services
- make sure that we are taking the needs and views of people with disabilities into account when we design or deliver services, make access improvements or develop policies
- continuously monitor and improve the ways in which we deliver services to people with disabilities
- secure commitment to work within the social model of disability.

In addition, this scheme aims to satisfy the broad requirements of the further and higher education sector.

Core principles and vision

Disability equality means different things to different people. Disability occurs because environmental, social and attitudinal barriers hinder people with disabilities from taking a full part in the community. This is known as the social model of disability and is defined as;

“the recognition that primarily it is the loss or limitation of opportunities, due to environmental and social barriers, that prevents people who have impairments from participating in society on an equal level with others.”
The social model of disability

The social model of disability was developed by people with disabilities to challenge the medical model of disability. The main difference between these two models is the location of the ‘problem’. Within the Medical model, people with disabilities are unable to play a full role in society as a direct result of their impairment.

The social model of disability argues that people with impairments are disabled by physical and social barriers. The ‘problem’ of disability is clearly located with social structures, the built environment and attitudes, rather than from a person’s impairment and medical condition. For the RCN, it is the acceptance of this model that is critical to understanding and implementing the Disability Equality Duty.

This disability equality scheme clarifies the RCN’s approach to eliminating disability discrimination. As an organisation we are therefore committed to working within the social model of disability. The Disability Equality Scheme outlines that work that will be needed to develop this common understanding and our approach to supporting and representing members, demonstrating excellence in employment practice and service delivery.

The disability equality duty

There is a general duty which applies to all public authorities, plus additional specific duties to support the majority of public authorities in achieving the outcomes required by the general duty.

The general requirement for a public authority when carrying out their functions is to have due regard to do the following:

- promote equality of opportunity between people with disabilities and other people
- eliminate discrimination that is unlawful under the Disability Discrimination Act
- eliminate harassment of people with disabilities that is related to their disability
- promote positive attitudes towards people with disabilities
- encourage participation by people with disabilities in public life
- take steps to meet people with disabilities’ needs, even if this requires more favourable treatment.

Essentially the general duty builds upon the duties of the Disability Discrimination Act 1995 and includes the proactive responsibility on public sector organisations to make reasonable adjustments to ensure that people with disabilities are not placed at a disadvantage when accessing or receiving goods, facilities, services and functions.
The RCN has supported the Work Injured Nurses Group (WING) for a significant period of time. This section of the strategy outlines the scope of this work within the RCN.

**RCN WING**

The primary function of RCN WING is to give personal support to nurses affected by injury or ill health. WING also provides a dedicated advice line which is available throughout the week as well as a series of comprehensive advice sheets covering topics from claiming specific benefits to surviving litigation.

**Membership**

RCN WING is first and foremost a support group for nurses who have an injury, illness or disability that affects them at work. It set out to be a self-help group and members are encouraged to contact other members and to share their good and bad experiences.

Membership of the group is free to RCN members and also open to "interested parties" such as stewards, safety representatives, and occupational health nurses.

The committee is comprised of volunteers, elected by the membership, who have a commitment to improve the situation for future generations of nurses. It consists of a chair, vice-chair, public relations officer (and editor of the quarterly), and up to three other non-portfolio officers.

Regional representatives for RCN WING have been established in some areas. At present WING has a network of 17 reps across the four countries. We are currently looking to increase the number of reps we have, so that we can cover all of the new regions and boards. These reps are volunteers who are prepared to be a local contact for members, to talk about WING to interested groups in their areas or represent RCN WING at conferences or exhibitions. They also try to initiate informal regional meetings to encourage members to come together. They receive basic training on common issues (such as injury benefits and pensions) and can refer members to the adviser or other specialist agencies.

**Training and other activities**

RCN WING organises study days for reps, members and other nurses. These study days may cover topics such as changes in welfare rights, career options or even complementary therapies. They are also, of course, a time when members can get together and share their experiences.

There is an annual general meeting that covers business matters such as committee elections and financial reporting and this is often combined with some training event or other presentation that may be of interest to members.

**The WING Discretionary Fund**

Injury, illness or disability can often have a significant effect on a person's financial situation. The WING Discretionary Fund was originally set up with funds raised from raffles but is now maintained by donations and the proceeds raised from selling goods at Congress and other such events. By far the largest donation comes each year from ACE Insurance, the underwriters of the Nurse Care and Student Care Personal Accident Policy marketed by RCN Membership Services, who currently donate £1 from each current policy each year.

**Involvement**

We have worked extensively with this group in the process of developing the scheme and more importantly in setting key priorities for the RCN in relation to achieving disability equality. We will continue to work with members and other stakeholders to ensure that their views on this Disability Equality Scheme are held under regular review.

**Other work**

The RCN recently contributed and responded to the Disability Rights Commissions investigations into health inequalities and fitness to practise standards.
Health inequalities: the research context

There has been a wide range of research focusing on the experience and health outcomes of people with disabilities within the health and social care sector. The Disability Rights Commission recently completed a formal investigation into health care inequalities. The investigation, entitled *Equal treatment: closing the gap*, examined the health inequalities faced by people with learning disabilities and people with mental health problems.

The investigation found that both groups of people were much more likely than other citizens to have significant health risks and major health problems.

The investigation highlighted the following areas:

Amongst other inequalities, people with mental health conditions are less likely than the general population to receive certain standard checks when they are ill. For example, people with mental health problems who have heart disease are less likely to receive cholesterol checks and cholesterol lowering drugs such as ‘statins’ than others with heart disease.

People with learning disabilities who have diabetes are less likely to have their body mass index measured than others with diabetes. Those who have had a stroke have fewer blood pressure checks than other stroke patients.

Other research by the Disability Rights Commission has indicated that other groups of people with disabilities also encounter discrimination. For example, 64 per cent of profoundly deaf people find accident and emergency units either inaccessible or inadequate for their needs (21 per cent of all people with disabilities expressed similar concerns.)

Wider health inequalities

Many people with disabilities also encounter ‘multiple discrimination’ because of gender, sexuality, race and age as well as social class and education.

For example, people with mental health conditions who are also from black and minority ethnic (BME) communities are significantly more likely to be compulsorily admitted to hospital as a result of their condition and are likely to stay longer.

They are also more likely than white people to be prescribed drugs or electroconvulsive therapy, rather than psychotherapy or counselling.

Whilst this version of the scheme does not attempt to redress these complex issues, it is anticipated that as we gather further intelligence and analysis, that subsequent equality schemes will seek to promote some solutions.
The Disability Equality Scheme

This section provides an overview of how the RCN intends to meet the requirements listed below as part of its response to the general duty.

✦ promote equality of opportunity between people with disabilities and other people
✦ eliminate discrimination and harassment that is unlawful under the Disability Discrimination Act
✦ promote positive attitudes towards people with disabilities
✦ encourage participation by people with disabilities in public life
✦ take steps to meet people with disabilities’ needs, even if this requires more favourable treatment.

We will promote equality of opportunity between people with disabilities and other people by:

✦ removing barriers to accessibility, particularly in relation to education and employment and access to services, information and buildings
✦ encouraging good practice in the private sector through our capacity as a source of influence
✦ upholding the social model and our guiding principles in the mainstream of our day-to-day and strategic work.

We will tackle discrimination and harassment against people with disabilities by:

✦ promoting positive images of people with disabilities within the scope of our campaign and policy work
✦ challenging patronising or discriminating attitudes within the range of our responses to policy documents and consultations
✦ ensuring that our environment as made as inclusive as possible to facilitate the involvement and full participation of people with disabilities
✦ continue to support, advise and represent RCN members who wish to seek redress because they have been discriminated against and harassed on the grounds of disability.

We will promote positive attitudes towards people with disabilities by:

✦ supporting the formation of groups, networks and services for disabled RCN members and RCN employees
✦ ensuring that our campaigns and policy responses stem clearly and explicitly from the social model of disability.

We will work to encourage participation by people with disabilities by:

✦ encouraging a review of governance structures to ensure that people with disabilities are not prevented from participating fully in the running of the RCN
✦ involving disabled members and employees in the changes and improvements we make where appropriate
✦ exploring new and effective ways to create and sustain a meaningful dialogue with RCN members and employees
✦ reviewing our own employment practice and behaviours to ensure that intentional or unintentional bias is removed
✦ creating a culture of inclusion and appreciation with the RCN
✦ meeting people with disabilities’ needs, even if this requires more favourable treatment
✦ asking for feedback on levels of satisfaction with the RCN as a service provider and an employer and acting on that feedback where appropriate and practicable.

The Disability Equality action plan

Our Disability Equality Scheme Action Plan will build on the Royal College of Nursing’s existing equality work and link into the corporate strategy process. These plans will complement the activities outlined in the other equality strategies.

The Action Plan is intended to implement effective monitoring systems and has been agreed by RCN Council which will receive six-monthly progress reports on the Plan's implementation. It will be reviewed on an
annual basis and scrutinised by the RCN Council sub-committee, the Diversity Monitoring Panel.

Responsibility for the overall implementation of this voluntary Disability Equality Scheme lies with Royal College of Nursing Service Delivery Directorate. Specific responsibilities have been allocated to the Disability Equality Champion and responsibility for the strategic leadership and facilitation scheme lies with the Diversity and Equality Unit.

The action plan has been structured to reflect the five themes contained in the existing RCN Strategic Plan.

**Reporting back on our progress**

We will use our annual operational planning process to implement the actions in the scheme and use these processes to measure how effectively we are achieving our disability equality goals as well as our related valuing diversity outcomes. We will make full use of our performance management frameworks to embed disability equality outcomes and approaches within the mainstream of the organisation’s work.

We will report our progress for the scrutiny of members against the milestones in the strategy in the RCN Annual Report. We will also produce a detailed, stand alone review of our valuing diversity goals on an annual basis. This will be published on our website and be made available for download.
**Disability Equality Action Plan: Making discrimination history**

**Represent**
The RCN represents the interests of nurses and nursing. To ensure we celebrate the diversity of our membership and maximise their skills and expertise it is vital that we capture data which tells us how well we are doing. We will undertake to put systems in place which ensure we capture the most relevant information and that our services and functions are free from all forms of discrimination.

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<thead>
<tr>
<th>Outcome</th>
<th>Tasks needed to achieve outcome</th>
<th>Who is responsible</th>
<th>Target date</th>
</tr>
</thead>
<tbody>
<tr>
<td>An RCN that is representative of its diverse membership base</td>
<td>Increase levels of diversity within the Council governance structure through review of existing arrangements</td>
<td>UKET Disability Equality Champion, RCN General Secretary and RCN Council</td>
<td>Ongoing for review by Nov 2008</td>
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<tr>
<td></td>
<td>Develop systems which centrally manage legal casework</td>
<td>Head of IT, Head of Legal, Executive Director, Service Delivery</td>
<td>Ongoing for review annually</td>
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<td></td>
<td>Monitor by disability: • the number of discrimination cases including outcomes of tribunals/hearings • representation on regional and country boards • activist training • stewards conferences</td>
<td>Head of Legal England Management Team, Northern Ireland, Scottish and Welsh Boards Chairs Head of Reps Education Team and equivalents across the UK Employment Relations and Events Team</td>
<td>Ongoing for review annually</td>
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**Influence**
The RCN wields considerable influence in a wide range of arenas on behalf of members and patients. Within the sphere of health and social care provision, it is essential that this power is harnessed effectively to lobby Government and other important agencies to develop policy, practice and infrastructure that promotes and delivers disability equality.

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<tbody>
<tr>
<td>The RCN uses the full extent of its lobbying and influencing power to champion Disability Equality</td>
<td>Ensure that all RCN campaigns are assessed for impact on disability equality</td>
<td>Communication Heads across the UK</td>
<td>Ongoing – to be reviewed annually</td>
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<td></td>
<td>Continue to increase visibility of nurses and health care support workers with a disability in RCN communication strategies and campaigns</td>
<td>Communication Heads across the UK</td>
<td>Ongoing – to be reviewed annually</td>
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<td></td>
<td>Ensure that the RCN website meets with web accessibility requirements</td>
<td>Head of Marketing</td>
<td>Ongoing – to be reviewed annually</td>
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<td></td>
<td>Ensure that disability equality issues are given due regard in all RCN consultation responses and policy development</td>
<td>Heads of Policy across the UK</td>
<td>Ongoing to be reviewed annually</td>
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<tr>
<td></td>
<td>Research health and social care sector compliance against the Disability Equality Duty and feed the results into our campaign and policy functions</td>
<td>Diversity and Equality Unit</td>
<td>December 2008</td>
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<tr>
<td></td>
<td>Support the development of groups and networks for disabled RCN employees and members</td>
<td>Diversity and Equality Unit</td>
<td>December 2008</td>
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**Support and protect**

One of our core goals is to protect and serve nurses and health care support workers in their full diversity. The challenge in this area is to ensure that as a service provider, employer and a trade union that we provide similarly high quality services to all members, regardless of whether or not they have a disability, and work firmly within the social model of disability. This section of the action plan aims to increase levels of satisfaction enjoyed by all members of the nursing family in their interaction with the RCN.

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<th>Target date</th>
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<tr>
<td>The RCN understands the specific needs of disabled nurses and health care support workers and provides appropriate services to meet those needs.</td>
<td>Conduct survey to assess levels of satisfaction regarding access and usage of counselling service, careers advice, welfare services and benevolent fund</td>
<td>Marketing Manager</td>
<td>Ongoing – to be reviewed annually</td>
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<td></td>
<td>Monitor member satisfaction by disability: the number of discrimination claims on the grounds of disability brought to the RCN and their outcomes</td>
<td>Head of Legal, Regional and country directors</td>
<td>Ongoing – to be reviewed annually</td>
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<td></td>
<td>Provide high quality information and training on the nature of the Social Model of Disability</td>
<td>Head of Reps Education Team and equivalents across the UK</td>
<td>Ongoing – to be reviewed annually</td>
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<td></td>
<td>Develop a coherent consultation framework with explicit valuing diversity principles contained within it</td>
<td>Diversity and Equality Unit</td>
<td>December 2007</td>
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Develop

The professional development of our members is important to us and ultimately vital for our long-term success as a trade union. This section of the action plan aims to consolidate the work that we have already undertaken to ensure that our learning and development services are accessible to both men and women.

We aim to ensure that all staff and participants in our various programmes and activities understand and work with the richness and strength of the many different facets of diversity and understand and develop people’s capabilities to work effectively with these challenges.

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<th>Target date</th>
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<tbody>
<tr>
<td>Services reflect the ongoing need to mainstream diversity and equality</td>
<td>Monitor by disability: 1. usage of RCN learning zone 2. Participants in Leadership, Practice Development Programmes and other education programmes</td>
<td>Head of RCN Learning Zone Head of Institute</td>
<td>Ongoing – to be reviewed annually</td>
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<tr>
<td>3. Forum and Forum Committee membership</td>
<td>Head of PND</td>
<td>By December 2008</td>
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<td>4. Use of library and information services</td>
<td>Head of Library</td>
<td>Ongoing – to be reviewed annually</td>
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<tr>
<td>Ensure that all programme content and materials produced from the RCN Learning and development institute reflect and embrace the ethnic diversity of the nursing family</td>
<td>Head of Institute</td>
<td>Ongoing – to be reviewed annually</td>
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<td>Introduce further quality mechanisms to ensure that all the Institute’s products and services are accessible and meet the diverse needs of RCN members</td>
<td>Head of Institute</td>
<td>Ongoing – to be reviewed annually</td>
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<td>Establish a diversity committee as part of the governance structure of the new Learning and Development Institute</td>
<td>Head of Institute</td>
<td>Ongoing – to be reviewed annually</td>
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<tr>
<td>• Audit and review all HR policies and procedures to ensure compliance with the duty</td>
<td>Head of HR</td>
<td>Ongoing – to be reviewed annually</td>
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<td>• Conduct disability equality impact assessments on all new projects and campaigns</td>
<td>Head of HR</td>
<td>Ongoing – to be reviewed annually</td>
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<td>• Monitor all policies for any adverse affect on the promotion of disability equality</td>
<td>Head of HR</td>
<td>Ongoing – to be reviewed annually</td>
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<tr>
<td>• Publish the results of disability equality monitoring and assessments</td>
<td>Head of HR</td>
<td>Ongoing – to be reviewed annually</td>
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<tr>
<td>• Monitor by disability access and allocation of Corporate Development Panel decisions</td>
<td>Head of OD</td>
<td>Ongoing – to be reviewed annually</td>
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<td>• Carry out diversity impact assessments on all new initiatives, policies and procedures</td>
<td>Head of HR</td>
<td>Ongoing – to be reviewed annually</td>
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<td>• Develop codes of conduct that create and maintain mutual respect and create an inclusive work environment</td>
<td>Head of HR</td>
<td>Ongoing – to be reviewed annually</td>
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<tr>
<td>• Ensure that all reasonable adjustments are carried out across the RCN property portfolio</td>
<td>Head of Estates</td>
<td>Ongoing – to be reviewed annually</td>
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A call to employers

The RCN urges the health and social care sector and those organisations contracted to provide services within the sphere to:

- systematically identify the barriers to achieving disability equality, and take decisive and considered action to removing these obstacles. Such organisations should also embed disability equality targets within their overall performance management frameworks to ensure that their progress in this area clearly demarcates as a successful organisation
- adopt the social model of disability as the basis for implementing the Disability Equality Duty
- review their treatment of employees and make reasonable adjustment and create mutual agreement on the retention of their skills, experiences and talents in the workplace
- recognise the multiple nature of discrimination, disadvantage and harassment and create robust systems, policies and procedures as well as workplace cultures that explicitly seek to eliminate these patterns of behaviour either at an institutional or individual level
- ensure that all contractors have in place robust procedures and policies to monitor and eliminate harassment and discrimination.

It is in recognising the complex layers of multiple discrimination that equality schemes are most successful.

We therefore urge employers to recognise that their services and employment practices may need substantial revision in the light of this new duty and take action to make these change a tangible reality for patients and employees. They should:

- mobilise staff, members and non-executive directors to develop a locally specific and aspirational vision of the outcomes needed to make disability equality a tangible reality
- understand and decisively tackle the institutional behaviours that prevent progress
- pursue disability equality outcomes vigorously within the course of their day-to-day and strategic operations

We urge regulatory bodies within health and social care to bring monitoring compliance against the Disability Equality Duty within the scope of their inspection regimes.

Addressing these challenges is critical to removing the obstacle of negativity and promoting valuing diversity. Implementing equality of opportunity is critical to achieving measurable outcomes in this area.

It is vital that all members of the health and social care community are fully engaged in the understanding that achieving disability equality is not simply about changes to the built environment, for example, placing ramps in hospital building or producing information in a range of alternative formats. It is fundamentally about identifying the barriers that prevent inclusion and choice and working systematically to eliminate these obstacles.