

## Cheshire Probation Area Single Equality Scheme - 2009/2012 - Action Plan

### Objective 1 – Publishing and reviewing the SES

Outcome	Actions	Deadline	Responsible officer	General duty covered	Progress report + evidence
1.1 Develop compliant SES	<p>Review of the existing Race, Gender and Disability Equality Schemes.</p> <p>Timetable produced to achieve deadline and incorporate dates SES to SMT and Board.</p> <p>Responsibilities allocated</p>	31 <sup>st</sup> March 2009	Chief Officer/ Assistant Chief Officer Equality and Diversity/Diversity Manager	1-12	<p>Review conducted/Reprt to Panel /Timetable produced in early January.</p> <p>Scheme approved at Board 27<sup>th</sup> March 2009</p>
1.2 Raise awareness of the Scheme and compliance with the duty	Launch the scheme and develop communications to engage all staff	April to June 2009	Assistant Chief Officer Equality and Diversity/ Diversity Manager	1-16	Communications materials prepared in March 2009
1.3 Review and revise SES 2009 – 12 annually and the functions and practices	Annual reports on progress and revisions as appropriate	Annually in March	Diversity Lead/Area Board/Chief Officer	1-12	1/4ly reports to EDAG and Diversity Panel. Annual Review reported to the Board. Annual review published on website for 31 <sup>st</sup> March each year

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### Objective 2 – Improving performance increasing access across service delivery and employment practice

Outcome	Actions	Deadline	Responsible officer	General duty covered	Progress report + evidence
<b>Service delivery</b>					
2.1 SLA (Diversity Grids) assist to develop fair outcomes across functions	<ul style="list-style-type: none"> <li>• SLA (Diversity Grid) reviewed quarterly at EDAG</li> <li>• Recommendations to SMT</li> <li>• Feedback to Diversity Panel</li> <li>• Practice changes put in place</li> <li>• Monitoring to determine if effective</li> <li>• Contribute to regional decision making to extend monitoring on age beyond under 25 and over 26 years of age.</li> </ul>	<ul style="list-style-type: none"> <li>• Quarterly</li> </ul> <p>March 2010</p> <p>March 2011</p>	<ul style="list-style-type: none"> <li>• ACO Equality and Diversity/Diversity Manager</li> <li>• ACO Equality and Diversity</li> <li>• ACO Equality and Diversity</li> <li>• Regional Diversity Grids group</li> </ul>	1-13	Minutes track SLA diversity grids considered, analysed, with reports to SMT and feedback as to decisions to Diversity Panel and EDAG. Further monitoring identifies lessening of inequalities.
2.2 Monitoring for disability of offenders maintained at 97%	<ul style="list-style-type: none"> <li>• Continue to monitor monitoring levels at monthly intervals</li> <li>• Implement action plans again should levels drop</li> </ul>	<ul style="list-style-type: none"> <li>• Monthly</li> <li>• As required</li> </ul>	<ul style="list-style-type: none"> <li>• Diversity Manager</li> <li>• Diversity Manager</li> </ul>	4,7  4,7	Monitoring levels maintained.

<p>2.3 Identify and determine how to address barriers to offenders completing their Orders.</p>	<ul style="list-style-type: none"> <li>• List of reasonable adjustments for offenders using CRAMS</li> <li>• Prepare a report linking monitoring and reasonable adjustments to EDAG.</li> <li>• Data analysed at EDAG</li> <li>• Identify barriers to offenders completing orders</li> <li>• Determine how to remove barriers to assist offenders complete orders/sentences</li> <li>• Identify disproportionality in relation to functions within SLA diversity grids</li> <li>• recommendations to SMT</li> <li>• SMT determine actions</li> </ul>	<ul style="list-style-type: none"> <li>• June 2009</li>   <li>June 2009</li> </ul>	<ul style="list-style-type: none"> <li>• ISU</li>   <li>Diversity Manager</li> </ul>	<p>4-7, 9</p>	<p>This information is collated at the same time as disability monitoring.</p> <p>Reasonable adjustments report considered at EDAG with report to SMT around possible actions.</p> <p>SMT actions reported to EDAG.</p>
<p>2.4 Staff have easily accessible, useful and effective shared resource directory to assist working with offenders.</p>	<ul style="list-style-type: none"> <li>• Identify and map information and resources including voluntary organisations</li> <li>• Develop resources directory</li> <li>• Launch directory and promote services</li> <li>• Set up network to be able to update directory</li> </ul>	<ul style="list-style-type: none"> <li>• September 2009</li>   <li>By November 2009</li>   <li>By March 2010</li> </ul>	<p>Diversity Manager</p>	<p>1-15</p>	<p>Mapping has begun.</p> <p>The resources directory in place, launched to staff.</p> <p>Staff report ease of access and usefulness of resources contained.</p>

		November 2009			Directory updated continuously.
2.5 Offenders with mental health problems get effective, appropriate and timely support	<ul style="list-style-type: none"> <li>• Provide training for staff to understand some symptoms of mental health problems</li> <li>• Include resources on mental health to resources directory</li> </ul>	Rollout began March 2009  September 2009	Training  Diversity Manager		<p>Training takes place.</p> <p>Staff identify training is effective.</p> <p>Offenders are supported and signposted appropriately.</p> <p>Offenders survey picks up effective support received.</p>

<p>2.6 Improved access to information for service users</p>	<ul style="list-style-type: none"> <li>• Collate all letters, templates and information sent to victims and offenders</li> <li>• Work with external organisation to identify readability and improve communication sent out to service users</li> <li>• Template all information on to the shared data base</li> <li>• Launch revised letters etc.</li>   <li>• Promote improved templates</li> <li>• Monitor outcomes</li> <li>• Report to EDAG</li> </ul>	<ul style="list-style-type: none"> <li>• March 2009-September 2009</li> </ul>	<p>Diversity Manager</p>	<p>4-7, 9</p>	<p>All means of communication identified and collated.</p> <p>Communications sent to external organisation.</p> <p>Report from organisation identifies literacy levels and suggests changes to be made.</p> <p>Templates changed, launched to staff with guidance on additional support for those service users who are dyslexic.</p> <p>Service users report communication easier.</p>
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2.7 Service users who are dyslexic get appropriate support.	<ul style="list-style-type: none"> <li>• Offenders on ETE are screened for dyslexia</li> <li>• review of screening data to assess levels of need in relation to support and education psychologist assessment</li> <li>• offenders on Skills for Life have access to both assessments</li> </ul>	Ongoing  June 2009  Ongoing	ETE SPO	4, 6, 9	
2.8 Services improved for women offenders	<ul style="list-style-type: none"> <li>• Working group convened to develop action plan</li> <li>• Working group reports to SMT</li> <li>• SMT determines actions</li> <li>• Action plan implemented</li> <li>• Monitoring identified</li> <li>• Outcomes across gender analyse the disproportionality</li> <li>• Inequalities identified and plans for addressing them raised</li> </ul>	From April 2009	ACO (Interventions, Equality and Diversity)	10, 12	<p>Action plan developed by multifunction/grey project group.</p> <p>Progress of action plan monitored quarterly by EDAG. Annual report to SMT, Diversity Panel and Board.</p>
2.9 ncreased awareness across Service and agencies that domestic abuse cuts across all diversity strands	<ul style="list-style-type: none"> <li>• Cheshire Domestic Abuse Partnership 'Breaking Down The Barriers' Conference takes place</li> <li>• Work identified to broaden awareness</li> <li>• Report to SMT</li> <li>• Analysis of existing caseload to determine numbers of cases of domestic abuse beyond</li> </ul>			1-7, 10-12	<p>Report to SMT.</p> <p>Caseload identified.</p> <p>EDAG minutes show how this is taken forward.</p>

	heterosexual male perpetrators.				Report to SMT.
2.10 Victim survey and SLA diversity grid show increased contact and satisfaction level from BME victims.	<ul style="list-style-type: none"> <li>• Victim liaison unit continues to liaise with the Police to improve reporting</li> <li>• EDAG monitors Victim contact data and reports levels.</li> <li>• Improved levels of ethnicity monitoring of victims.</li> <li>• Relevant data from Victim survey on EDAG agenda.</li> </ul>	Ongoing	Victim Liaison Unit SPO	1-3, 14	<p>This work has already begun.</p> <p>Monitoring shows continuous improvement.</p>
2.11 Effective intervention in place to address Racially-Motivated behaviour.	<ul style="list-style-type: none"> <li>• Intervention identified</li> <li>• training provided</li> <li>• monitoring identifies???????</li> <li>• communication with sentencers</li> <li>• identification of completion targets</li> </ul>	From February 2009		3	<p>Against Human Dignity decided as appropriate intervention</p> <p>Training provided May 2009</p> <p>Implementation date May/June 2009</p>
2.12 Identify and improve levels of faith monitoring for offenders.	<ul style="list-style-type: none"> <li>• Report to EDAG to identify levels of faith monitoring of offenders.</li> <li>• EDAG proposes to SMT possible follow-up action.</li> </ul>			1-3, 14	<p>Report to EDAG. Question included in offender survey.</p> <p>Analysis reported to</p>

	<ul style="list-style-type: none"> <li>• Question included in offender survey</li> <li>• analysis identifies levels of satisfaction</li> <li>• report to EDAG</li> <li>• proposals to SMT</li> <li>• determine whether any disproportionality for offenders who are Muslim.</li> </ul>				<p>EDAG.</p> <p>Report to SMT.</p>
<b>Employment practice</b>					
2.13 Employment figures across race, gender, disability show no disproportionality.	<ul style="list-style-type: none"> <li>• Employment figures on agenda at EDAG twice a year</li> <li>• EDAG proposes actions to SMT</li> <li>• structures put in place to address any disproportionality</li> <li>• monitoring outcomes in relation to LGB also</li> <li>• monitoring identifies comparable levels across all groups</li> </ul>		HR Manager/Diversity Manager	1-6, 10-13, 15	Employment data discussed and minuted at EDAG.
2.14 Staff survey shows increased levels of satisfaction across all staff groups.	<ul style="list-style-type: none"> <li>• ACO meets with all staff support groups</li> <li>• staff survey results considered and how to address</li> <li>• report to EDAG</li> <li>• proposals to SMT</li> <li>• next staff survey data</li> </ul>	Beginning June 2009	ACO (Interventions Equality and Diversity)/Diversity Manager	1-12, 15	<p>ACO meets with staff</p> <p>Reports provided data analysed to EDAG and minuted.</p>

	<p>compared to that of the 2008</p> <ul style="list-style-type: none"> <li>report to SMT from EDAG</li> </ul>				
2.14 Disabled staff are confident to state they have a disability and ask for reasonable adjustments to be made.	<ul style="list-style-type: none"> <li>ACO meets with Access group to discuss outcomes from staff survey</li> <li>disabled staff draw up FAQ</li> <li>report to EDAG/SMT</li> <li>actions identified and addressed</li> <li>staff survey shows increased confidence</li> </ul>	From June 2009	ACO (interventions equality and diversity)	4-7	<p>Meeting takes place,</p> <p>Report to EDAG and SMT.</p> <p>Result of staff survey on EDAG Agenda.</p>
2.15 Disabled staff changing jobs or moving to a new office get reasonable adjustments identified and put in place prior to move taking place	<ul style="list-style-type: none"> <li>Discussion at EDAG</li> <li>internal transfer form amended to include this information</li> <li>form included as part of reasonable adjustments procedure</li> <li>staff survey enables area to identify improvements for disabled staff transferring jobs or offices.</li> </ul>	April 2009	HR Manager/Diversity Manager	4-7	<p>Form amended</p> <p>Question included in staff survey disabled staff get adjustments made</p>
2.16 Disabled staff get reasonable	<ul style="list-style-type: none"> <li>Reasonable adjustments procedure revised with Access</li> </ul>	By November 2009	Diversity Manager	7	Reasonable adjustment

<p>adjustments made.</p>	<ul style="list-style-type: none"> <li>• group</li> <li>• procedures published and launched</li> <li>• summary leaflet drawn up and included in induction pack and application packs</li> <li>• summary leaflet provided to the Diversity Panel</li> <li>• reasonable adjustments discussed in team meetings</li> <li>• disabled staff report reasonable adjustments made in a timely fashion</li> </ul>				<p>procedure in place</p> <p>team meeting minutes reflect discussion takes place</p> <p>staff survey identifies reasonable adjustments in place in timely fashion</p>
<p>2.17 An effective recruitment and selection policy and procedure developed including employment equality duties.</p>	<ul style="list-style-type: none"> <li>• Review implement a duty data and evidence and staff survey results</li> <li>• close gaps in race equality employment monitoring data in relation to training (take up and access), performance appraisals and capability and appointments made.</li> <li>• Set up processes to monitor outcomes and report quarterly.</li> <li>• Improve monitoring collation and analysis across race,</li> </ul>	<p>Begin April 2009</p>	<p>HR Manager</p>	<p>1-15</p>	<p>Staff survey report improved outcomes across all staff groups.</p> <p>Staff group reflects fair representation across all groups.</p>

	<p>gender, disability and age.</p> <ul style="list-style-type: none"> <li>• set up reporting employment equality data quarterly to EDAG.</li> <li>• Involve cross grade groups and staff networks in equality impact assessment.</li> <li>• Identify opportunities for discretion, decision making and subjectivity.</li> <li>• Establish monitoring processes with clear reporting outcomes.</li> </ul>				
2.18 The Area is able to demonstrate fair outcomes in relation to employment practice across race, disability, gender and age.	<ul style="list-style-type: none"> <li>• Publish data annually on the website.</li> <li>• Identifying and beginning to address monitoring in relation to age.</li> </ul>	<p>March 2010</p> <p>March 2011</p>	HR Manager/Diversity Manager	<p>1-12</p> <p>13</p>	Data published on website outcomes for staff monitorable by age.
2.19 The Area can identify any disproportionality in employment practice around sexual orientation and faith.	<ul style="list-style-type: none"> <li>• Identify level of monitoring within the other probation area/trusts.</li> <li>• Survey staff as to confidence to report</li> <li>• determine monitoring to be undertaken</li> </ul>	March 2012	HR Manager/Diversity Manager	14-15	EDAG minutes reflect progress.
2.20 Staff have increased confidence to challenge	<ul style="list-style-type: none"> <li>• Continue to roll out training across the Area in challenging discrimination</li> </ul>	From December 2008	Staff Development and Training	1-15	Training rolled-out

discrimination.	<ul style="list-style-type: none"> <li>• staff report increase in confidence</li> <li>• reduction in bullying and harassment</li> </ul>				
2.21 Increased levels of staff and manager confidence in appraisal and performance review process.	<ul style="list-style-type: none"> <li>• Research presented to SMT</li> </ul>	April 2009	Diversity Manager	1-12, 16	
2.22 Determine reasons for disproportionate levels of male staff within the Area.	<ul style="list-style-type: none"> <li>• Identify position in other areas/trusts</li> <li>• report to EDAG</li> </ul>	March 2012	Diversity Manager	12	Report to EDAG
2.23 The Area is able to provide effective support for Trans staff and service users and those transitioning.	<ul style="list-style-type: none"> <li>• Awaiting national procedures</li> <li>•</li> </ul>			10-12	Procedures in place Trans staff and offenders report supported

## Cheshire Probation Area Single Equality Scheme - 2009/2012 - Action Plan

### Objective 3 – Meeting legal requirements, including equality duties

Outcome	Actions	Deadline	Responsible officer	General duty covered	Progress report + evidence
3.1 Area continues to impact assess policies and procedures	<ul style="list-style-type: none"> <li>• Define the process of impact assessment review</li> <li>• Schedule of policies determined and agreed</li> <li>• Determine staff needs for training on impact assessment</li> <li>• Identifier trainer</li> <li>• Training provided</li> <li>• Staff demonstrate increased confidence to carry out impact assessments</li> <li>• Impact assessments quality assured at EDAG</li> </ul>	July 2009	SMT/Diversity Manager	1-15	<p>Schedule of policies being determined.</p> <p>Staff identified for training and training provided.</p> <p>Equality impact assessments pick up disproportionality and put in place effective monitoring around opportunities to discretion decision-making.</p>
3.2 Equality impact assessments published on the Area web-site	<ul style="list-style-type: none"> <li>• Process developed</li> <li>• Designated space on the website determined</li> <li>• Impact assessments published</li> </ul>	August 2009	Diversity Manager/ISU	1-15	Equality impact assessments published on the website.
3.3 Outcomes of	<ul style="list-style-type: none"> <li>• Determine scope, capacity, resources</li> </ul>			1-15	Data provided to

surveys and audits monitorable by ethnicity, gender, disability, age and where possible faith and sexual orientation	necessary and timescale				and analysed by EDAG
3.4 he Area can access an effective disability panel (of/for) for involvement on policy development and review.	<ul style="list-style-type: none"> <li>• Map potential groups</li> <li>• identify potential to sharing facility with other criminal justice agencies</li> <li>• determine requirements</li> <li>• meet with potential panel members</li> <li>• determine panel</li> <li>• provide training to panel</li> </ul>			4-6, 8, 9	Panel in place
3.5 Continuation of utilising CHAWREC BME panel for policy development and consider further development of consultation mechanism.				1-3	
3.6 recognition of impact of Human Rights legislation for Area and action plan to address gaps.				16	

