Equality Delivery System (EDS2) Project Plan 2015-16

Abdul Khan
Equality and Diversity Team

CONTENTS

1. Introduction

1.1 Purpose

This report describes our approach to implement the Equality Delivery System (EDS2). EDS2 is an assessment tool designed to measure NHS equality performance with an aim to produce better outcomes for people using and working in the NHS and to gather equality evidence that demonstrates compliance with the Public Sector Equality Duty (PSED) of the Equality Act (2010).

The implementation of EDS2 supports our strategic objective to promote equality throughout the planning, development and delivery of our services whilst appreciating and respecting the diversity of our local community and staff.

1.2 EDS2 Aims

The aim of the EDS2 project is to improve services for people who belong to vulnerable and protected groups. The objective is to assess health inequalities and provide better working environments, free of discrimination, for people who use, and work in, the Trust.

1.3 Background

Over the past few years, there have been significant changes in health and social care regulations such as CQC registration requirements, Equality Act (2010), NHS constitution and the Human Rights Act. These laws / regulations aim to tackle inequalities and drive improvements in service delivery. In particular, under the Equality Act (2010), the Trust has a legal duty to promote equality and diversity and to ensure that everyone - patients, public and staff - have a voice in how we are performing and where we should improve.

1.31 Equality Act (2010)

The law talks about treating everyone in good and fair way. The Equality Act (2010) sets out when it is unlawful to discriminate and harass a person and it gives rights to our service users, carers and employees to raise complaints regarding discrimination. The law protects people from discrimination on the grounds of so called 'protected characteristics' (age, disability, gender re-assignment, marriage and civil partnership, pregnancy and maternity, race including nationality and ethnic origin, religion or belief, sex and sexual orientation).

1.32 Public Sector Equality Duty (PSED)

Section 149 of the Equality Act (2010) requires us to demonstrate compliance with the "Public Sector Equality Duty" (PSED) which places a statutory duty on the Trust to address unlawful discrimination. The remit of PSED is very broad and covers decision-making, policy development, budget setting, procurement and employment functions. The PSED has two parts:

General Duty to:

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

Specific Duty to:

- Publish information to demonstrate compliance with the general duty by 31st January each year.

  ➢ Our equality monitoring information mainly covers:

    ✓ Service user equality monitoring
    ✓ Patient Advice and Liaison Service equality monitoring
    ✓ Incidents equality monitoring
    ✓ Compliments and complaints equality monitoring
    ✓ Workforce equality monitoring
    ✓ Trust membership equality monitoring
    ✓ Estates equality monitoring
    ✓ Equality Analysis

- Prepare and publish Equality Objectives at least every four years.

  ➢ Our current Equality Objectives are:

    ✓ Information and monitoring – effectively monitoring to improve the usefulness of information
    ✓ Communication – improving communication between the Trust and service users and carers, voluntary and community groups, staff, and primary care
    ✓ Engagement – improving engagement with a range of stakeholders.
    ✓ Learning and development – ensuring the Trust meets mandatory requirements and provides training that responds to the needs of staff
    ✓ Making the organisation more reflective of the communities we serve

1.4 Who will monitor our compliance with the Equality Act (2010)

The Equality and Human Rights Commission is responsible for monitoring and enforcing the PSED of the Equality Act (2010), failure to comply with the PSED may result in enforcement actions. EDS2 is a part of our commissioning contract and we are required to submit the annual return to the commissioners in the beginning of November every year. Care Quality Commission (CQC) will also monitor the equality aspect of our service delivery.

2 What is EDS2

To support NHS organisations to perform well on equality, NHS England designed a National Framework called "Equality Delivery System" (EDS2). It is an audit tool designed to measure NHS equality performance against four goals. The tool sets out four goals around equality, diversity and human rights. Within the four goals, there are 18 standards or outcomes, against which we assess and grade our equality performance. The focus of the EDS2 outcomes is on the things that matter the most for patients, communities and staff.

EDS2 is also applicable to the people from other disadvantaged groups, including people who fall into 'Inclusion Health' groups, who experience difficulties in accessing, and benefitting from, the NHS. These other disadvantaged groups typically include but are not restricted to:

- People who are homeless
- People who live in poverty
- People who are long-term unemployed
- People in stigmatised occupations (such as women and men involved in prostitution)
- People who misuse drugs
- People with limited family or social networks
- People who are geographically isolated

EDS supports good practice in relation to other health care frameworks such as:

- Care Quality Commission (CQC) Registration Framework
- NHS Outcomes Framework
- NHS Constitution
- Human Resources Transition Framework (FREDA)

3 EDS2 Project Cycle 2014-2015

The EDS2 has 18 outcomes, nine examine equality in service delivery and nine examine equality in workforce development. The project cycle will be repeated every year for 4 years, to gradually focus all services across all outcomes for all aspects of all protected characteristics. The project will be implemented in 7 stages:
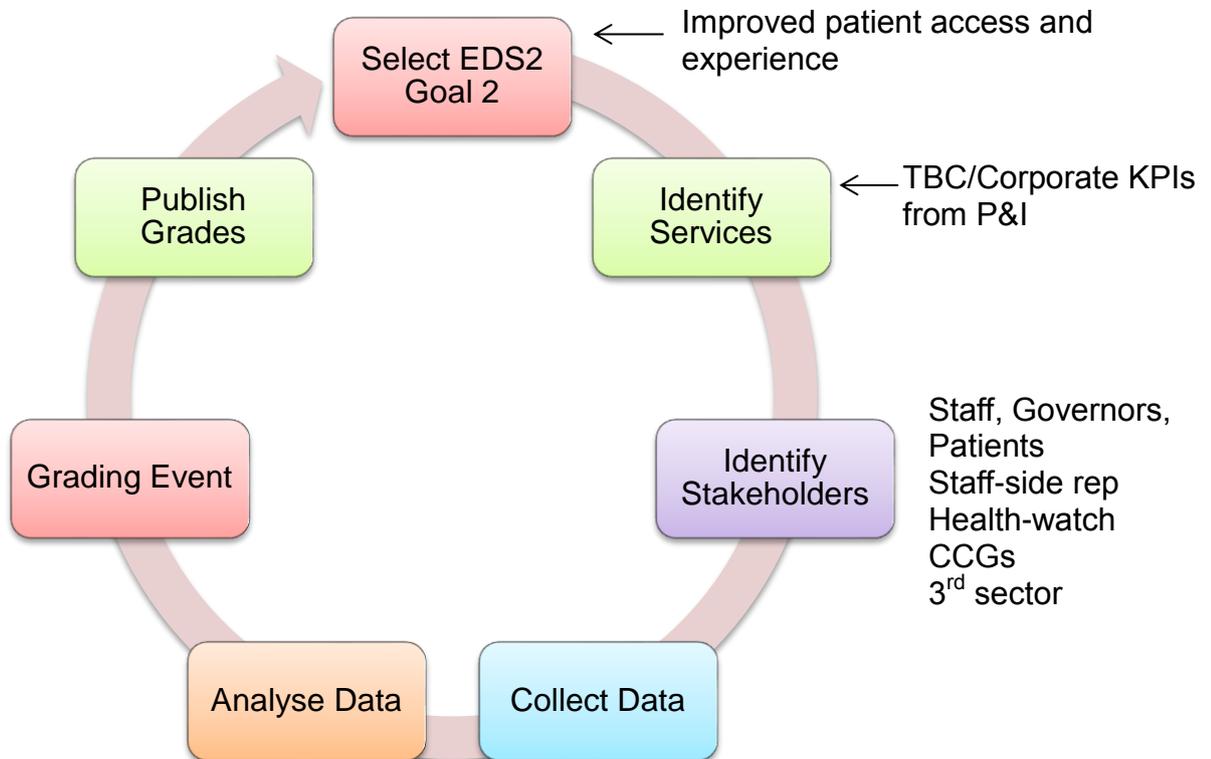
3.1 Select EDS2 Outcome

This year (2015-2016), the Trust is aiming to audit against EDS2 goal 2 "Improved Pt access and experience".

3.2 Identify Services

The Trust approach to target the service areas will be selective, informed or where there is a local evidence to suggest any equality issues within the protected / vulnerable groups or people who are most at risk. Commissioners' priority areas will also inform the selection of service areas. This year, the trust is aiming to assess IAPT services.

3.3 Identify Stakeholders

The aim of the stakeholders is to assess our equality evidences against the EDS2 outcomes and to RAG-grade our performance. Typically local stakeholders comprise: Neighbouring NHS Trusts and local CCGs, patients, carers, members of local community groups and voluntary organisations, staff networks, FT Governors, staff and representatives of staff-side organisations.

3.4 Data collection

The evidence against the outcomes, in the form of patient stories and narrative about processes, systems and procedures will be collected by EDS2 project lead. Service leads will also facilitate the data collection.

3.5 Data Analysis

For each of the EDS2 outcomes within goal 2, we are required to produce evidence demonstrating:

- Analysis of service delivery by protected groups
- Evidence of engagement with the protected groups;
- Evidence of equality being included in the governance and business plan
- Evidence of action plans for the areas that require improvements.

In consultation with the respective service leads, the qualitative and quantitative data will be analysed and aggregated by the EDS2 project lead for appropriate scoring based on Purple, Green, Amber, Red (PRAG) rating. Where there are performance gaps, it will be acceptable as part of our equality action plan to address the areas for improvements.

Grading Key:

We are doing very well People from all protected groups fare as well as people overall	Excelling
We are doing well People from most protected groups fare as well as people overall	Achieving
We are doing OK People from only some protected groups fare as well as people overall	Developing
We are doing badly People from all protected groups fare poorly compared with people overall	Undeveloped

3.6 Grading Event – Engagement with the local stakeholders

Performance will be assessed and graded by local stakeholders / independent third parties and other NHS organisations at a grading event. Stakeholders, especially patients and community groups will be supported to understand the grading process. For this purpose, the E&D team has planned to organise EDS2 training workshop to participating local stakeholders in support of the EDS evidence evaluation.

3.7 Publishing the report and feeding back to stakeholders

The engagement and feedback from the grading event will inform our action plans and where there are performance gaps, we will address the areas for improvements. The final report will be circulated to all of the stakeholders that we have engaged with. The report will also be made available on the Trust website.

Appendices

Appendix A: Equality Delivery System - Goals and Outcomes

Goal	Outcome
1. Better health outcomes for all	1.1 Services are commissioned, designed and procured to meet the health needs of local communities
	1.2 Individual patients' health needs are assessed, and resulting services provided, in appropriate and effective ways
	1.3 Transitions from one service to another, for people on care pathways, are made smoothly with everyone well-informed
	1.4 When people use NHS services their safety is prioritised and they are free from mistakes, mistreatment and abuse
	1.5 Screening, vaccination and screening programmes reach and benefit all local communities and groups
2. Improved patient access and experience	2.1 People, carers and communities can readily access hospital, community health or primary care services and should not be denied access on unreasonable grounds
	2.2 People are informed and supported to be as involved as they wish to be in decisions about their care
	2.3 People report positive experiences of the NHS
	2.4 People's complaints about services are handled respectfully and efficiently
3. Empowered, engaged and well-supported staff	3.1 Fair NHS recruitment and selection processes lead to a more representative workforce at all levels
	3.2 The NHS is committed to equal pay for work of equal value and expects employers to use equal pay audits to help fulfil their legal obligations
	3.3 Training and development opportunities are taken up and positively evaluated by all staff
	3.4 When at work, staff are free from abuse, harassment, bullying and violence from any source
	3.5 Flexible working options are available to all staff consistent with the needs of the service and the way people lead their lives
	3.6 Staff report positive experiences of their membership of the workforce
4. Inclusive leadership at all levels	4.1 Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations
	4.2 Papers that come before the Board and other major Committees identify equality-related impacts including risks, and say how these risks are to be managed
	4.3 Middle managers and other line managers support their staff to work in culturally competent ways within a work environment free from discrimination

Appendix B: Data Collection Tool

Goal 2　Improved patient access and experience
Service　IAPT

Pennine Care NHS
NHS Foundation Trust

Outcome 2.1	People, carers and communities can readily access hospital, community health or primary care services and should not be denied access on unreasonable grounds			
Team OR Service Name	**How we are doing based on case study** /commentary / Narrative (please write an issue / task or a situation and how we dealt with it, mainly case studies E.G journey from point of entry to further referral or exist, pathway support / health and social care integrating - our action OR process to meet the outcome Or areas for improvement with action plans	**Grade**	**Evidence /Location**	**Action required**
		Achieving		
		Excelling		
		Developing		
		Undeveloped		

Grading Key:

We are doing very well People from all protected groups fare as well as people overall	Excelling
We are doing well People from most protected groups fare as well as people overall	Achieving
We are doing OK People from only some protected groups fare as well as people overall	Developing
We are doing badly People from all protected groups fare poorly compared with people overall	Undeveloped