

Equality Delivery System 2: Grades and Improvement Plans 2016-17

Yasmin Mahmood

23 March 2017

This report documents NHS Sutton Clinical Commissioning Group's performance and improvement plans on equality and diversity.



Contents	Page
The Public Sector Equality Duty and the Equality Delivery System (EDS2)	3
The Equality Delivery System (EDS2)	4
Stakeholder engagement and grading: goals 1-4	5
Grades for Goals 1 and 4	5-8
Equality Objectives 2013-17	9
Publishing EDS2 Results	10
Monitoring and Reviewing the EDS2	10
Comments and Feedback	11

Appendix	Title	Page
1	EDS2 Goals and Outcomes	12
2	Good Practice	13
3	Goals 1-4 Improvement Plan	15

Table	Title	Page
1.1	EDS2 Grades 2014-15 till 2016-17	5
1.2	EDS2 Grades for Goals 1 and 2 in 2016-17	6
1.3	EDS2 Grades for Goal 3 from 2014-15 till 2016-17	7
1.4	EDS2 Grades for Goal 4 from 2014-15 till 2016-17	8
1.5	Equality Objectives 2013-17	9
1.6	EDS2 Implementation Plan for 2016-17	10

Version 1	Yasmin Mahmood	31.01.2017
Version 2	Yasmin Mahmood, with input from Samantha Green and Jane Pettifer	08.02.2017
Version 3	Yasmin Mahmood, with input from Quality Committee	23.02.2017
Version 4	Yasmin Mahmood, with input from Equality and Diversity Steering Group	09.03.2017

1. The Public Sector Equality Duty and the Equality Delivery System

1.1 The Equality Act 2010 and Public Sector Equality Duty

The Equality Act 2010 provides a legal framework to strengthen and advance equality and human rights. The Act brought existing equality law within a single piece of legislation and covers race, sex, disability, age, marital status and civil partnership, sexual orientation, religion or belief, pregnancy and maternity and gender reassignment. These groups are referred to as 'protected characteristics'.

Under the Equality Act, public bodies, such as NHS Sutton Clinical Commissioning Group (referred to as Sutton CCG), have a general duty to show 'due regard' to three aims:

- 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.

To meet the general duty, Sutton CCG has two 'specific duties':

- publishing 'equality information' to demonstrate compliance with the general duty,
- publishing 'equality objectives' needed to meet the aims of the general duty.

To be legally compliant, Sutton CCG would need to meet both the general and specific duties of the Equality Act – as they are part of its Public Sector Equality Duty (PSED). The aim of the PSED is to integrate consideration of equality into the day-to-day business of public bodies and consider how to tackle systemic disadvantage faced by people sharing the protected characteristics stated above.

Demonstrating 'due regard' to people with protected characteristics means that Sutton CCG must consider the three aims of the general duty in its decision-making and day-to-day activities by:

- 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, and
- encouraging people from protected groups to participate in public life or in other activities where their participation is disproportionately low.

It can do this through: training and development, consultation and engagement with staff, leadership teams, service users and members of the public and setting objectives and targets around improving outcomes for protected groups.

Implemented systematically, the PSED can lead to improved decision-making, improved satisfaction levels among staff and service users and effective use of resources.

1.2 The Equality Delivery System (EDS2)

The Equality Delivery System (EDS2) was launched on 11 November 2011 by NHS England to help health commissioning and provider organisations improve their performance on equality and diversity through regular reviews and engagement with staff, patients, carers, community activists, public and voluntary sector partners and Governing Body members.

Refreshed in 2013, the EDS2 is now implemented annually by all NHS organisations. It is included in the NHS Standard Conditions of Contract and recognised as a tool to meet the aims of the General Equality Duty.

The EDS2 assessment reviews 18 outcomes (described in Appendix 1) grouped under the following four goals:

- Goal 1: Better Health Outcomes**
- Goal 2: Improved Patient Access and Experience**
- Goal 3: A Representative and Supported Workforce**
- Goal 4: Inclusive Leadership**

The goals and outcomes are graded as either: undeveloped, developing, achieving or excelling (using a red/Amber/Green/Purple colour-coding scheme) following an evidence-gathering and engagement process.

Improvement plans developed thereafter are integrated into operational and organisational development plans through tools such as service specifications, key performance indicators and clinical review processes. Issues related to the workforce are addressed through training and development, appraisal processes and policies and procedures.

The overall objective of the EDS2 is to embed equality into everyday business practices and foster a culture of transparency and accountability.

The EDS2 has helped Sutton CCG systematically review a selection of commissioned services, employment practices and decision-making processes to ensure compliance with the Equality Act.

It has helped improve services and provided a means to engage with key stakeholders, namely patients, staff, leadership teams, the voluntary sector and the public. The aggregated goals for Sutton CCG since 2014 for all four Goals can be found in Table 1.1.

In 2016-17, Sutton CCG was graded overall **ACHIEVING** for Goals 1 and 2 for the Children's Speech and Language Service. The Continuing Health Care service was graded **ACHIEVING** for two outcomes and **DEVELOPING** for the remaining two outcomes for Goal 2. For Goals 3 and 4, overall the CCG was graded **DEVELOPING**.

Table 1.1 EDS2 Grades 2014-15 till 2016-17

EDS2	2014-15	2015-16	2016-17
Goal 1	Developing	Developing (Admiral Nursing) Developing (Enhanced Optometry Services)	Achieving (C-SALT) Developing (CHC)
Goal 2	Developing	Developing (Admiral Nursing) Achieving (Enhanced Opt. Services)	Achieving (C-SALT) Achieving/Developing (CHC)
Goal 3	Developing	Developing	Developing
Goal 4	Developing	Achieving	Developing

2. Implementing the Equality Delivery System

Since authorisation in April 2013, Sutton CCG has ensured that embedding equality and diversity is a priority. The implementation of the EDS2 for 2016-17 was overseen by the CCG's Equality and Diversity Steering Group.

The group meets quarterly and monitors progress of the EDS2 work plan. The group includes representatives from the Governing Body, commissioning, primary care and quality and safety teams. Feedback from the group is reported to the Quality Committee and Governing Body.

2.1 Stakeholder engagement and grading

Sutton CCG gathered a range of quantitative and qualitative evidence throughout 2016-17 to assess its performance against the EDS2.

A key aspect of the assessment process was the involvement of a range of stakeholders - staff, Governing Body representatives, providers, carers and voluntary sector representatives - in the grading of Goals 1 to 4.

To assess Goals 1 and 2 (the patient-focussed domains), the CCG reviewed the following commissioning priorities: Children's Speech and Language Therapy (C-SALT) Service and Continuing Health Care (CHC). Grading for both goals was completed at a public event in July 2016.

Based on their feedback, Sutton CCG was assessed as **ACHIEVING** for Goal 1 for the Children's Speech and Language Therapy Service (C-SALT) and **DEVELOPING** for Continuing Health Care (CHC).

For Goal 2, the CCG was graded **ACHIEVING** for the C-SALT service. The CHC service was graded **ACHIEVING** for Outcomes 2.1 and 2.4 and **DEVELOPING** for Outcomes 2.2 and 2.3. See Table 1.2.

Table 1.2 EDS2 Grades for Goals 1 and 2 2016-17

Goal	Outcomes	Children's Speech and Language Services	Continuing Health Care	
Goal 1 (Better Health Outcomes)	1.1 Services are commissioned, procured, designed and delivered to meet the health needs of local communities	(Achieving)	(Developing)	
	1.2 Individual people's health needs are assessed and met in appropriate and effective ways	(Achieving)	(Developing)	
	1.3 Transitions from one service to another, for people on care pathways, are made smoothly with everyone well-informed	(Developing)	(Developing)	
	1.4 When people use NHS services their safety is prioritised and they are free from mistakes, mistreatment and abuse.	(Excelling)	(Achieving)	
Goal 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	(Achieving)	Achieving	
	2.2 People are informed and supported to be as involved as they wish to be in decisions about their care	(Developing)	(Developing)	
	2.3 People report positive experiences of the NHS	(Achieving)	(Developing)	
	2.4 People's complaints about services are handled respectfully and efficiently	(Achieving)	(Achieving)	
Grading Key	Undeveloped People from all protected groups fare poorly compared with people overall OR evidence is not available.	Developing People from only some protected groups fare as well as people overall.	Achieving People from most protected groups fare as well as people overall.	Excelling People from all protected groups fare as well as people overall.

Table 1.3 Goal 3 grades between 2014 and 2016

To assess Goals 3 and 4, the CCG held engagement events with staff and the Governing Body between August and December 2016.

Goal 3 outcomes were graded at a staff workshop held in September 2016, where a cross-section of employees from a range of teams reviewed data from the Employee Staff Records (ESR) and the staff survey 2016. The staffing data, training records for the year and pay and grading protocols were further reviewed by the CCG's Equality and Diversity Steering Group in March 2017, following which grades for Goal 3 and Outcome 4.3 were finalised.

For this goal, Sutton CCG was assessed as **DEVELOPING** (See Table 1.3).

Table 1.3 EDS2 Grades for Goal 3

Goal 3: A representative and supported workforce	Outcomes			Grades in 2014	Grades in 2015	Grades in 2016
	3.1 Fair NHS recruitment and selection processes lead to a more representative workforce at all levels.			(D)	(D)	(A)
	3.2 The NHS is committed to equal pay for equal work and expects employers to use equal pay audits to help fulfil their legal obligations.			(U)	(D)	(D)
	3.3 Training and development opportunities are taken up and positively evaluated by staff			(D)	(D)	(D)
	3.4 When at work staff are free from abuse, harassment, bullying and violence from any source.			(D)	(A)	(D)
	3.5 Flexible options are available to all staff consistent with the needs of the service the way people lead their lives			(U)	(A)	(D)
	3.6 Staff report positive experiences of their membership of the workforce.			(D)	(A)	(A)
Grading Key	Undeveloped Staff members from all protected groups fare poorly compared with the overall workforce OR evidence is unavailable.	Developing Staff members from only some protected groups fare as well as the overall workforce.	Achieving Staff members from most protected groups fare as well as the overall workforce.	Excelling Staff members from all protected groups fare as well as the overall workforce.		

Goal 4 was assessed using evidence gathered from the CCG's leadership team, the staff survey and staff workshop. Grades for outcomes 4.1 and 4.2 were validated externally by Sutton Centre for the Voluntary Sector (Sutton CVS).

Overall the CCG secured a **DEVELOPING** grade for Goal 4.

Outcomes 4.1 and 4.2 were graded **DEVELOPING** by Sutton CVS. Outcome 4.3 was assessed as **ACHIEVING** at the staff workshop (see Table 1.4).

Table 1.4 EDS2 Grades for Goal 4 between 2014 and 2016

Goal 4: Inclusive leadership	Outcomes			Grades in 2014	Grades in 2015	Grades in 2016
	4.1 Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their Organisations.			(D)	(A)	(D)
	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.			(D)	(D)	(D)
	4.3 Middle managers and other line managers support their staff to work in culturally competent ways within a work environment free from discrimination.			(A)	(D)	(A)
Grades	Undeveloped There are no examples of a strong and sustained commitment	Developing Only some of the examples show a strong and sustained commitment	Achieving Many of the examples show a strong and sustained commitment.	Excelling All of the examples show a strong and sustained commitment.		

Some of the key areas of improvement highlighted through the EDS2 engagement and assessment process included:

For Goals 1 and 2, the Children's Speech and Language Therapy (C-SALT) and Continuing Health Care (CHC) services identified:

- The need to gather information on users' religion or belief (or lack of it) so that staff are aware of user needs related to religion,
- Transitions between services need to be managed better and need to involve carers,
- For the C-SALT service, it identified that engagement with parents for whom English was not a first language needed to improve and the complaints process needed to be promoted widely,
- For the CHC service, it was identified that information on the assessment process needed to be simplified and promoted so people can understand the process better. The engagement also identified the need to communicate why equality monitoring is done to improve the quality of information on patients' protected characteristics.

Goal 3:

- Need for recruitment and selection training for managers and greater on-site HR support,
- More awareness on training and development opportunities, such as shadowing,
- Employee Assistance Helpline to be promoted,
- Flexible working policy needs to be promoted through the staff handbook.

Goal 4: The evidence for this goal highlighted the following:

- Governing Body members need to start demonstrating the improvements they have been able to bring about or how they have succeeded in reducing inequalities,

- Key board papers and reviews need to complete equality analyses routinely, from the outset, rather than at a later stage. This needs to be evidenced and summarised in Governing Body papers and cover sheets.

3. EDS2 Goals 1-4 Improvement Plans 2016-17

Improvement plans for EDS2 Goals 1 to 4 have been developed following internal and external consultations. Implementation of plans is being overseen by the Equality and Diversity Steering Group, which is chaired by the Director of Quality. The plans can be made available upon request.

Every four years, the CCG's Equality Objectives will be reviewed and progress reported against them through the Public Sector Equality Duty Report. Sutton CCG's Equality Objectives for 2013-17 can be found in *Table 1.5*. These will be reviewed and a new set developed in May 2017 for 2017-21.

Table 1.5: Sutton CCG's Equality Objectives 2013-17

Year 1 (2013/14)
1. Building, using and sharing data collection and evidence base
2. Develop Communications and Engagement strategies so they are inclusive and actively responding to needs of diverse community
3. Develop Equality Key Performance Indicators (KPIs) to measure improvement in health outcomes
4. Training and conducting Equality impact Analysis (EA)
5. HR: Training needs identified for Board, CCG
6. HR: Identify baseline of disaggregated staff views on current workforce issues (inc. health and wellbeing, bullying and harassment)
Year 2 (2014/15)
1. Delivery of Communications and Engagement strategy delivers equality requirements.
2. Patient and public involvement in decommissioning, commissioning, design & procurement of services.
3. HR: Deliver training to embed equalities for Governing Body.
Year 3 (2015/16)
1. Review Communications and Engagement strategies as inclusive and actively responding to needs of diverse community
2. HR: Demonstrate improvement of disaggregated staff views on current workforce issues (inc. health and wellbeing, bullying and harassment)
Year 4 (2016/17)
1. Review Equality Key Performance Indicators to measure improvement in health outcomes

In Year 4 of the Equality Objectives, the EDS2 review has helped to evidence that:

- Staff value job variety and involvement in a range of projects and programmes to develop themselves,
- Employees prefer more on-site HR presence; and training and support on recruitment and selection,
- Governance for equality-related risks needs to be strengthened and monitored on an on-going basis to support fair decision-making. Key board papers must enclose an equality-related risk analysis or a distinct equality analysis as part of due process.

The improvement plans will help to inform the Equality Objectives for 2017-21.

5. Publishing the EDS2 results

The EDS2 Report and grades for Goals 1 - 4 will be published on Sutton CCG's website following its Governing Body meeting in May 2017. The improvement plans will inform the CCG's operational and organisational development plans for 2017/18 to ensure they are embedded in mainstream business and are reviewed at agreed intervals. The improvement plans can be made available upon request.

6. Monitoring and Reviewing the EDS2

Sutton CCG will monitor and review the implementation of the EDS2 on an annual basis. The EDS2 framework will also help Sutton CCG to meet its Public Sector Equality Duty and its Equality Objectives. Staff, leadership teams, patient groups and partner organisations will continue to be involved in ensuring improved outcomes.

7. EDS2 Implementation Plan 2016/17

The implementation plan for the EDS is given below in *Table 1.6*.

Table 1.6 Sutton CCG's EDS2 Implementation Plan for 2016-17

Action	By When	By Who
Meeting with Director of Quality to discuss approach and agree commissioning priorities	Complete	CSU ED lead/CCG ED lead
Commissioning team to agree EDS priorities to be reviewed	Complete	CSU ED lead/ CCG ED lead
Initial meetings with commissioning managers	Complete	CSU ED lead
CCG commissioners and providers gather data for EDS	Complete	CCG lead commissioners
Identify invitees for public grading event, develop communications and circulation lists.	Complete	CSU ED lead/PPE coordinator
EDS2 Goal 1 & 2 grading process with stakeholders	Complete	CSU ED lead/PPE coordinator
EDS2 Goal 1 & 2 - Service Improvement for Equality Plans developed and approved with commissioners / providers	Complete	CSU ED lead/ Commissioning managers
Goal 3 – A representative and supported workforce (internal assessment)	Complete	CSU ED Lead / Director of Quality / HR
Goal 4 - Inclusive Leadership (4.1 & 4.2 evidence collation & independent assessment, 4.3 – internal assessment)	Complete	CSU ED Lead / Director of Quality
Sign off/approval of EDS2 Grades and Improvement Plan by Equality and Diversity Steering Group.	Complete	CSU ED lead/ Director of Quality
Sign off/approval of EDS2 Grades and Improvement Plan at Quality Committee	Complete	CSU ED lead/ Director of Quality

Sign off/approval of EDS2 Grades and Improvement Plan at Sutton Governing Body	May 2017	CSU ED lead/ Director of Quality
Review and Sign-off of EDS Improvement Plan for Goals 1-4	June 2017	CSU ED lead/ Director of Quality

8. Comments and Feedback

We welcome any comments and feedback on this EDS2 Grades and Improvement Plan Report. We would like to know how effective this scheme is in promoting and delivering equality and welcome any comments and suggestions for improvement.

Comments and feedback can be sent to:

Director of Quality, NHS Sutton Clinical Commissioning Group, Priory Crescent,
Cheam, Sutton SM3 8LR
m.hopper@nhs.net

Or

Equality, Diversity and Inclusion Manager
NHS NEL Commissioning Support Unit
yasminmahmood@nhs.net

Appendix 1: EDS2 Goals and Outcomes

The Goals and outcomes of EDS(2)		
Goal	Number	Description of outcome
Better Health Outcomes	1.1	Services are commissioned, procured, designed and delivered to meet the health needs of local communities.
	1.2	Individual people's health needs are assessed and met 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 other health promotion services reach and benefit all local communities.
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.
A Representative and Supported Workforce	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.
Inclusive Leadership	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 2: Current Good Practice

The following examples of good practice were highlighted by staff, service users, partner organisations and leadership teams during the stakeholder engagement exercises for Goals 1 to 4:

1. Goals 1-2: Better health outcomes and improved patient access and experience

a) Children's Speech and Language Therapy Service

Protected Characteristic	Good practice	Fulfilment of which aim of PSED:
Ethnicity	Use of interpreters and culturally-competent staff to work with service users	All 3 aims
Disability	Flexible service - children aged 8/9 years with selective mutism /specific speech disorders are able to remain in the service within current resources until they are able or old enough to self-manage.	All 3 aims
Disability and other vulnerable children	Service operates weekly drop-in sessions for vulnerable children. Specialist therapist available for children with Down's Syndrome.	All 3 aims
Carers	Therapists produce specific programmes and resources for use by parents at home. New Education, Health & Care Plans (EHCP) are co-designed with parents and families.	All 3 aims

b) Continuing Health Care

Protected Characteristic	Good practice	Fulfilment of which aim of PSED:
All	Detailed and rigorous assessment process, following which services are commissioned for those meeting the criteria set by the national framework. Includes fast track assessments for special diagnosis.	All 3 aims
All	Patient's personal and religious needs are catered for, including funding places in nursing homes outside Sutton.	All 3 aims
All	Nurses identify/establish with patients what sort of care they need, where they want it and details of their next of kin. Review satisfaction after 3 months and thereafter annually. Patients can appeal if they feel assessment is unfair and access advocacy services to represent their needs.	All 3 aims

c) Goal 3: A representative and supported workforce

Protected Characteristic	Good practice	Fulfilment of which aim of PSED:
All	User and provider involvement in selection panels to ensure objective selection processes. Use of good job description and person specification to appoint 'perfect' candidate. Respectful and polite conduct shown by interview panel – reflects well on organisation and promotes its reputation.	All 3 aims
All	Supportive managers who help to deal with bullying and harassment or unacceptable behaviour.	All 3 aims
All	Line management support to work flexibly.	All 3 aims

d) Goal 4: Inclusive leadership

Protected Characteristic	Good practice	Fulfilment of which aim of PSED:
All	Good examples of championing equality and inclusion with the Governing Body.	All
All	Middle managers very supporting of staff	All