

Equality Delivery System (EDS2) Assessment Scores 2017 & Equality Objectives Annual Review

1. Executive Summary

This paper is being presented to Trust Board to provide a summary of the 2017 Equality Delivery System Assessment Scores, which incorporates an annual review of the Trust's Equality Objectives 2016-2020.

2. Background

The Public Sector Equality Duty is supported by specific duties set out in regulations which came into force on 10 September 2011. The specific duties require public bodies to publish relevant, proportionate information demonstrating their compliance with the Equality Duty; and to set themselves specific, measurable Equality Objectives.

The Equality Delivery System (EDS2) is a toolkit which has been designed to help NHS Organisations to meet the requirements of the Public Sector Equality Duty. The EDS2 toolkit supports NHS organisations to identify areas for improvement.

The EDS2 toolkit is structured around 4 Goals:

- **Goal 1** Better health outcomes for all.
- **Goal 2** Improved patient access and experience.
- **Goal 3** Empowered, engaged and included staff.
- Goal 4 Inclusive leadership at all levels.

Against these four areas there are a set of 18 outcomes. These range from service quality to how staff, are managed in the Trust. All health care providers are required to review and grade performance against each outcome.

Following NHS England Guidance, WWL has chosen to narrow its focus to reviewing a small number of outcomes each year – these are reviewed annually to ensure we look at all outcomes over a period of time. The 4 outcomes we identified for 2016/17 are listed below

Goal		Outcome	Grade
1	1.1	Services are designed and delivered to meet the health needs of local communities	Developing
2	2.2	People are informed and supported to be as involved as they wish to be in decisions about their care	Developing
3	3.6	Staff report positive experiences of their membership of the workforce	Developing
4	4.3	Middle managers and other line managers support and motivate their staff to work in culturally competent ways	Developing

3. EDS2 Assessment / Scoring Process

In March 2017 the Trust undertook its sixth assessment of performance against the EDS (incorporating the Trust Equality objectives 2016-2020) and obtained feedback from key stakeholders. An action plan has been developed to address gaps & areas for improvement.

The following summarises our key evidence and local stakeholder engagement:

Outcome 1.1

<u>Services are designed and delivered to meet the health needs of local communities</u>

- On 1st November 2016, WWL launched a new service providing quick and effective
 care aimed at reducing the time spent in hospital for patients who may benefit from a
 more personalised multi-disciplinary assessment. The 'Age Well Unit is a new ShortStay Unit providing early assessment and treatment of patients aged 75 and over,
 with the aim of a safe discharge within 72 hours. Patients are admitted to the Age
 Well unit via A&E where they then begin treatment.
- In order to ensure that the design and implementation of the new Age Well Unit met the health needs of local communities, feedback from the 'Older You' 2015 Consultation delivered by NHS Wigan Borough CCG was reviewed. Report findings were incorporated within the design and implementation of the Age Well Unit. Patients, public, residential home residents, Age UK service users and staff were engaged with during the consultation. Activities included Focus Groups; awareness stands at libraries and public locations; attendance at public meetings and residential homes.
- A Patient Experience Survey is to be commenced on the Age Well Unit to obtain patient feedback.
- EDS Evidence Report sent to Health Watch for review in March 2017.

Outcome 2.2

<u>People are informed and supported to be as involved as they wish to be in</u> decisions about their care

National statistics identify that black and minority ethnic communities are up to 5 times more likely to develop diabetes than the general population. A Patient Experience Survey was therefore undertaken to ensure that the provision of our Diabetes Service meets the needs of our local BME community. A Survey was circulated to 38 BME patients who attended diabetes clinics within a 3 month period (Nov 2016 to Jan 2017).

Of the 8 patients who participated within this survey and completed the equality monitoring data form, analysis showed that there were no specific trends / concerns in relation to equality related issues. Overall positive feedback and good patient experience received. The need to ensure all patients have their cultural and religious needs discussed, noted and shared with the Diabetes Nursing Team.

- Head of Engagement attended Wigan SWAP (Support for Wigan Arrivals) local drop in session in February 2017 to engage with local asylum seekers and refugees / ascertain their experiences of using WWL services. Overall positive feedback was received. Services were easily accessible; overall good care was received; they were treated with dignity and respect and found the staff to be caring. Those who had difficulty communicating in English, were provided with access to interpreter services.
- EDS Evidence Report sent to Health Watch for review in March 2017.

Outcome 3.6

Staff report positive experiences of their membership of the workforce

- The 2016 National Staff Opinion Survey engagement indicator places the Trust in the highest 20% when compared with trusts of a similar type. This reflects that overall staff members are reporting positive experiences of their membership of the workforce.
- The 2016 National Staff Opinion Survey shows no change from 2015 in the percentage of staff believing that the Trust provides equal opportunities for career progression or promotion which is again in the top 20% of the country.
- The 2016 National Staff Opinion Survey data has improved slightly on last year in relation to the percentage of staff experiencing discrimination at work in the last 12 months and remains in the best 20% of the country. Although data also indicates that 21% of employees have experienced harassment, bullying or abuse from patients, relatives or the public in the last 12 months, this is broadly comparable to last year and lower than the national average for acute trusts which is 27%. The internal EDS Staff Survey 2017 indicated that only 6% had had such experiences and 64% of staff responses stated that they feel that the Trust deals with instances in an effective manner.
- For the first time in 2016, the Trust published data with regards to the Workforce Race Equality Standard (WRES) in order to demonstrate through the 9 Point metric how we are addressing race equality issues in a range of staffing areas. WWL is performing better than many other Trusts in relation to the specific indicator relating to BME representation at Board level which is a problem area nationally.
 - Local Pulse Check Surveys continued to be carried out this year. Feedback from the January 2017 survey indicates that 71% of respondents would recommend WWL as a place to work. Pulse check survey analysis now has the facility to filter responses according to protected groups unless the sample size is small when results cannot be displayed for anonymity reasons. Data available from filtered data indicates that feedback from respondents from protected groups is positive.
- Further targeted focus groups were held for Staff Living with a Disability and BME staff with action plans and outcomes communicated via awareness raising initiatives following each event.
- The Focus Group for Staff Living with a Disability allowed a network to be developed.
 Communications around this have been published on the Trust intranet to raise awareness and individualised support reviews have been further developed.
- A survey was issued to all BME staff as a starting point for establishing the agenda of a local BME Network Forum.
- Staff stories have continued to be gathered from staff who took part in initiatives or who
 felt that they would like to comment on support received from the Trust or experiences
 they wished to share. Some of these staff have been invited to attend the Executive led
 Workforce Committee to elaborate on their experiences. Thus feedback indicates that
 staff members appreciate the support received from the Trust in relation to ID matters.
- Production of Inclusion and Diversity Video / Podcast for use within leadership
 programme and for wider roll out as a standalone training resource within the e-learning
 suite of online training resources. Senior buy-in in the form of an introduction by the
 Chief Executive.
- WWL actively supported and participated in the first ever Wigan Pride 2016. WWL has committed to build on this for Wigan Pride 2017.
- BRAP, an Equalities Charity based in Birmingham commissioned by Big Lottery to explore how organisations have promoted equality, requested a visit to WWL after

- hearing about our work and engagement with staff from Roger Kline, NHS Equality Director. Their findings were very positive and were published on the I and D pages of the intranet website.
- WWL has continued to publish an annual I and D Schedule Of Events to raise awareness of protected characteristics covered under the Equality Act 2010. Some events have been led by I and D champions with a view to widening involvement and increasing uptake.
- In order to peer review EDS scores against Goal 3, evidence was sent to Stockport NHS Foundation Trust.

Outcome 4.3

Middle managers and other line managers support and motivate their staff to work in culturally competent ways

- Findings from the 2016 National Staff Opinion Survey indicate that 87% of the workforce believe that the Trust provides equal opportunities for career progression and promotion and 5% of staff indicate that they have experienced discrimination in the last 12 months. Neither of these elements demonstrates any statistically significant changes from the 2015 findings.
- The EDS Internal Staff Survey 2017 results show that 74% of respondents felt that managers actively take steps to create high performing diverse teams.
- During 2016, we carried out a review of communication methodologies so as to improve take up and further increase awareness. This work will develop further with the introduction of the new intranet website during the summer of 2017 and the associated "apps" which this will bring.
- The remit of the Inclusion and Diversity Champions has been widened and the CEO weekly update message to staff and the WWL weekly news bulletin have been used to greater effect to make staff and managers aware of key I and D messages.
- Line managers have released staff members who are in Inclusion and Diversity Champion roles to attend regular meetings and also work on projects during working hours as many of these form key aspects of the annual I and D Schedule of Events referred to above. A notable example was Anti-Bullying Week in November 2016 which involved two Champions putting together information stands for a number of Trust sites, issuing awareness literature at these locations and collating staff feedback and recommendations for consideration by the Executive led I and D Steering Group.
- Managers and supervisors have encouraged their teams to submit the Staff Stories referred to above to raise awareness of initiatives, comment on support received from the Trust or publicise experiences they wished to share.
- Managers and Supervisors from all Divisions within the Trust took part in a Focus Group
 to share good practice and establish gaps in resources available and feedback from the
 Focus Group for Staff Living with a Disability highlighted some improvement areas such
 as sharing experience and the provision of support and guidance for managers in the
 form of a toolkit for communicating with different groups covered under the Equality Act.
- Staff attendance at Focus Groups has been actively encouraged by managers by way of
 making them aware of them and releasing them to facilitate their attendance on the day
 and participate in follow up actions.
- Following the successful Inclusion and Diversity Leadership training events delivered over the previous 3 years, managers and supervisors shared their experiences on camera as part of the filming of the Inclusion and Diversity Video / Podcast referred to above.
- During the past year, the Inclusion and Diversity team have launched a number of competitions and managers have actively encouraged their staff to enter these and thereby increased discussion and raised awareness within departmental teams.

 In order to peer review EDS scores against Goal 4, evidence was sent to Stockport NHS Foundation Trust.

The specific outcomes and Trust scoring relating to these EDS goals are summarised in **Appendix 1.**

4. Trust Equality Objectives

As required by the Public Sector Equality Duty (Equality Act 2010), Equality Objectives must be set and published every 4 years. Progress against our 2016-2020 Equality Objectives are reviewed annually and revisited at four yearly intervals in line with equality legislation.

See Appendix 2 for a summary of our Equality Objectives, including progress update.

5. EDS2 Action Plan

The EDS 2017/18 Action Plan has been updated to reflect the actions outstanding from 2016/17 and to incorporate our Equality Objectives and actions arising from the recent 2017 EDS2 Assessment.

6. Monitoring

Monitoring and review of the Equality Objectives and Action Plan will be through the delivery and implementation of the EDS2 Action Plan with quarterly updates to the Trust's established Inclusion and Diversity Steering Group.

Progress will also be reviewed annually within the Trust's Inclusion and Diversity Annual Monitoring Report.

7. Conclusion

Trust Board are requested to note the scores against each of the EDS2 Outcomes.

Debbie Jones / Philip Makin May 2017

EDS2 Outcomes and Grades 2016/17

Although we have chosen to focus on 4 outcomes for 2016/17 (shaded below) it should be recognised that the evidence included within this assessment will likely have an impact on other outcomes too.

Grades based on 2015/16 evidence submission for all other outcomes are listed below:

Goal		Outcome	Grade
1	1.1	Services are designed and delivered to meet the health needs of local communities	Developing
1	1.2	Individual people's health needs are assessed and met in appropriate and effective ways	Developing
1	1.3	Transitions from one service to another are made smoothly with everyone well informed	Developing
1	1.4 When people use services their safety is prioritised and they are free from mistakes, mistreatment and abuse		Developing
1	1.5	Screening, vaccination and other health promotion services reach and benefit all local communities	Developing
2	2.1	People can readily access community health services and should not be denied access on unreasonable grounds	Developing
2	2.2	People are informed and supported to be as involved as they wish to be in decisions about their care	Developing
2	2.3	People report positive experiences of the NHS	Achieving
2	2.4	People's complaints about services are handled respectfully and efficiently	Developing
3	3.1	Fair NHS recruitment and selection processes lead to a more representative workforce at all levels	Achieving
3	3.2	The NHS is committed to equal pay for work of equal value and expected employers to use equal pay audits to help fulfil	Undeveloped
3	3.3	Training & Developing opportunities are taken up and positively evaluated by all staff	Developing
3	3.4	When at work, staff are free from abuse, harassment, bullying and violence from any source	Developing
3	3.5	Flexible working options are made available to all staff, consistent with the needs of patients, and the way that people	Achieving
3	3.6	Staff report positive experiences of their membership of the workforce	Developing
4	4.1	Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations.	Achieving
4	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.	Achieving
4	4.3	Middle managers and other line managers support and motivate their staff to work in culturally competent ways within a work environment free from discrimination.	Developing



Equality Delivery System (EDS2) Objectives and Outcomes – 2016/17 Grades

Goal 1		Outcome	2014 Score	2015 Score	2016 Score	2017 Score			
Better Health Outcomes for All	1.1	Services are commissioned, procured, designed and delivered to meet the health needs of local communities.	Developing	Developing	Developing	Developing			
	1.2	Individual people's health needs are assessed and met in appropriate and effective ways.	Developing	Developing	Developing	Developing			
	1.3	Transitions from one service to another, for people on care pathways, are made smoothly and everyone well informed.	Developing	Developing	Developing	Developing			
	1.4	When people use NHS services their safety is prioritised and they are free from mistakes, mistreatment and abuse.	Developing	Developing	Developing	Developing			
	1.5	Screening, vaccination and other health promotion services reach and benefit all local communities.	Developing	Developing	Developing	Developing			
Assessment Criteria	•	 Evidence of one or more care pathway which suggests there is significant local equality another. 	ce of one or more care pathway which suggests there is significant local equality progress as people transit from one service to r.						
	•	 Evidence of one or more service / care setting which suggests there is significant equal 	uality progress for people's safety.						
	 For all protected groups, we have to assess and grade how well: Service transitions are made, including how well patients, carers and professionals are kept informed o Key aspects of safety are prioritised and managed. 				what is har	opening.			
	•	 Evidence of how well other disadvantaged groups, including inclusion health groups far 	e compared	with people	e overall.				
Assessment Key Gaps /	Key Patient equality monitoring data not yet recorded in respect of all 9 protected characteristics. Disability; Sexual Orientation; Transgender; and Marriage and Civil Partnership not yet recorded.								
Development Areas	Goal: Once equality data is collated and recorded within hospital activity, data can be extracted to identify any visible trends / inequalities.								
	NHS	Trust's I&D Leads are members of: E&D Wigan Borough Collaborative; Greater Manches E&D Network Forum; Wigan Borough CCG Accessible Information Standard Group - Wo practice and jointly promote and challenge inequalities.							

Goal 2		2015 Score	2016 Score	2017 Score					
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.	Developing	Developing	Developing	Developing			
	2.2	People are informed and supported to be as involved as they wish to be in decisions about their care.	Developing	Developing	Developing	Developing			
	2.3	People report positive experiences of the NHS.	Achieving	Achieving	Achieving	Achieving			
	2.4	People's complaints about services are handled respectfully and efficiently.	Developing	Developing	Developing	Developing			
Assessment Criteria	 Evidence of one or more service / care setting which suggests that there is significant local equality progress for people in relation to: Access to services. The information and support people receive, so that they can be involved in decisions about them. People's experiences. Handling of complaints. 								
	•	 For all protected groups, we have to assess and grade how well: Services are accessed, taking into account the fairness of reasons when access is denied. People are informed and supported. Service is experienced. Complaints are handled. 							
	•	Evidence of how well other disadvantaged groups, including inclusion health groups fa	re compared	with people	overall.				
Assessment Key Gaps /	Patient equality monitoring data not yet recorded in respect of all 9 protected characteristics. Disability; Sexual Orientation; Transgender; and Marriage and Civil Partnership not yet recorded.								
Development Areas		Goal: Once equality data is collated and recorded within hospital activity, data can be extracted to identify any visible trends / inequalities.							
	NHS	The Trust's I&D Leads are members of: E&D Wigan Borough Collaborative; Greater Manchester E&D Provider Leads Forum; North West NHS E&D Network Forum; Wigan Borough CCG Accessible Information Standard Group - Working in collaboration to share equality data and best practice and jointly promote and challenge inequalities.							

Goal 3		Outcome	2014	2015	2016	2017
			Score	Score	Score	Score
Empowered, Engaged and	3.1	Fair NHS recruitment and selection processes lead to a more representative workforce at all levels	Achieving	Achieving	Achieving	
Well-Supported Staff	3.2	The NHS is committed to equal pay for work of equal value and expected employers to use equal pay audits to help fulfil their legal obligation	Undeveloped	Undeveloped	Undeveloped	
	3.3	Training & Developing opportunities are taken up and positively evaluated by all staff	Developing	Developing	Developing	
	3.4	When at work, staff are free from abuse, harassment, bullying and violence from any source	Developing	Developing	Developing	
	3.5	Flexible working options are made available to all staff, consistent with the needs of patients, and the way that people lead their lives.	Achieving	Achieving	Achieving	
	3.6	Staff report positive experiences of their membership of the workforce	Developing	Developing	Developing	
	 Protected groups Evidence that we have used equal pay audits to help fulfil our legal obligations. For all protected groups we have to ass the extent to which they receive equal pay for work of equal value. For all protected groups we have to assess & grade the extent of abuse, harassment, bullying & violence For all protected groups we have to assess & grade the availability of flexible working options For all protected groups we have to asses & grade how well membership of the workforce is experienced 					
Assessment key	The	key gaps/development areas of Goal 3 are:				
gaps/developm ent areas	DLCAIrFC	continue with overseas recruitment drives. Develop and implement a BME Leaders module within the WWL Leadership Programme. Ink in with BME Staff Support Network Forum to share good practice and work together of continue to offer training at a variety of days and times. Continue to undertake audits of incidents of violence and aggression for BME staff to identative support of and participation in Wigan Pride 2017. Involve local LBGTQ+ groups in Trust business and in particular the activities of the I & Description of the	tify key action Operational G	Group.		

Goal 4	Outcome	2014	2015	2016	2017
		Score	Score	Score	Score

Inclusive Leadership at All Levels	4.1	Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations.	Achieving	Achieving	Achieving		
	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.	Developing	Achieving	Achieving		
	4.3	Middle managers and other line managers support and motivate their staff to work in culturally competent ways within a work environment free from discrimination.	Developing	Developing	Developing		
Assessment Criteria	 Evidence of 10- 20 instances when Board members and senior leaders had the opportunity to demonstrate their commitment to equality in the past year. Evidence of 10-20 papers that came to the Board and other major committees in the past year or, if needs be, a longer period and assess & grade the extent to which the selected papers took account of the equality related impacts including risks and how risks will be managed. Assess & grade for all protected groups the extent to which staff are supported within the workplace. 						
Assessment key gaps/developme nt areas	sment key levelopme The key gaps/development areas of Goal 4 are:						



Equality Objectives 2016-2020

EDS Goal	Equality Objective	Key Progress – 2016/17	Outcome
Goal 1: Better Health	We will work together with the local Lesbian, Gay, Bisexual & Trans (LGBT)	Engaged with local LGBT community on the Trust's proposed I&D Strategy and equality objectives.	Feedback obtained, reviewed and incorporated within strategy.
Outcomes for All	community to improve and expand the quality of the information, knowledge and understanding we have about our LGBT service users. We will ensure their	Attended launch of Wigan Pride on 17/05/17. Rainbow Flag raised across hospital sites on international Day Against Homophobia.	WWL seen as fully inclusive employer and service provider. Increased staff and patient engagement and participation.
	experience of our services is improved by	Fully supported and participated within Wigan PRIDE 2016.	
	being more responsive to their needs.	 Engagement Team hosted an information stand and engaged with local LGBT community. 	
		I&D Champions undertook role of Stewards.	
		WWL Choir performed at Event.	
		'Guidance for Staff on Supporting Trans Service Users' reviewed and updated. Engaged with service users.	To act as a resource for staff to ensure they are provided with the required skills and knowledge to be effective within their roles. SOP approved by DQEC and PARC.
		Baseline Staff LGBT Awareness Survey circulated to staff.	Baseline score set / Understanding of staff's current knowledge and understanding of LGBT.
Goal 2: Improved patient access and experience	We will ensure that our patients are communicated with in a manner that is appropriate to their specific need or requirement within the Trust. We will identify how patients prefer us to	Baseline Accessible Information & Interpreter Services Staff Awareness Audit undertaken. Baseline Scores set.	Baseline score set to measure future progress of Equality Objectives Action Plan. Staff's current knowledge of awareness / current practice ascertained. Wards/Departments requiring further training identified.
	communicate with them from the earliest point of contact. Our objective will be to ensure that every time we communicate with them, that we use their preferred method.	Requirements of Accessible Information Standard reviewed. Key stakeholders identified. IT capacity to record and alert patient needs reviewed. Risk Assessment undertaken / included on Corporate Risk Register.	Wigan AIS Collaborative Group established (chaired by Wigan CCG). Meetings attended monthly.
		On-going implementation / continuing to work in collaboration with CCG.	Increased staff and patient awareness. Provides evidence that WWL is working towards meeting the standard.
		Best practice within other Trusts reviewed.	0
		Easy Read In-Patient Leaflet reviewed and published on Trust Website.	Provision of easy read patient information increased.

EDS Goal	Equality Objective	Key Progress – 2016/17	Outcome
Goal 3: Empowered, engaged and included staff	Work to reduce inequalities experienced by staff and applicants from a BME background so as to improve the engagement and experiences of BME staff within the workplace.	Facilitated the establishment and management of a BME staff support network within the Trust so as to provide opportunities for people to share, learn and contribute to improving the Trust.	Improved level of BME satisfaction and engagement within the 2016 National Staff Survey.
	within the workplace.	Undertook an audit of incidents of violence and aggression.	Low levels of BME incidents but still an area of concern.
		Developed and enhanced our approach to recruitment, selection and promotion to positively attract, retain and support the progression of diverse individuals within the workforce.	Improved level of BME satisfaction and engagement within the 2016 National Staff Survey.
		Ran celebratory events such as Black History Month to raise the profile of BME events and promote awareness within the workplace.	Black History month promoted as well as International Day against Racial Discrimination via competition.
		BME Coaching actively supported and promoted.	National initiatives also made available to staff and applications supported.
		Developed and implemented a BME Leaders module within the WWL Leadership Programme.	I and D Podcast to form part of the distance learning elements of leadership programmes (CMI level 3, 5 and 7) and manager induction programme.

EDS Goal	Equality Objective	Key Progress – 2016/17	Outcome
Goal 4: Inclusive leadership at all	Equip Trust managers to proactively manage Inclusion and Diversity within their teams, so that staff work in an equal,	Held a baseline Management Focus Group so as to establish gaps in knowledge needing to be addressed.	Feedback obtained, reviewed and incorporated.
levels	diverse and inclusive environment regardless of their equality group.	Carried out a needs analysis audit (questionnaire) for managers and follow up.	Feedback from questionnaire analysed and incorporated into action plan.
		Produced a podcast for managers and aspiring managers via the e-learning suite of online training resources.	Ensure senior members of staff are provided with the required skills and knowledge to be effective in their roles.
		Developed local resources consisting of a tool kit of guidance documents, awareness sessions and master classes.	Trans Master Class held. Set of local guidance resources produced to cover areas such as Religion and Belief / Awareness of Protected Groups