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| NHS Equality Delivery System 2022 |
| EDS Reporting Template |
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| Version 1, 15 August 2022 |

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| Classification: Official |
| Publication approval reference: PAR1262 |

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## Equality Delivery System for the NHS

***The EDS Reporting Template***

Implementation of the Equality Delivery System (EDS) is a requirement on both NHS commissioners and NHS providers. Organisations are encouraged to follow the implementation of EDS in accordance EDS guidance documents. The documents can be found at: [www.england.nhs.uk/about/equality/equality-hub/patient-equalities-programme/equality-frameworks-and-information-standards/eds/](http://www.england.nhs.uk/about/equality/equality-hub/patient-equalities-programme/equality-frameworks-and-information-standards/eds/)

The EDS is an improvement tool for patients, staff and leadersof the NHS.It supports NHS organisations in England - in active conversations with patients, public, staff, staff networks, community groups and trade unions - to review and develop their approach in addressing health inequalities through three domains: Services, Workforce and Leadership. It is driven by data, evidence, engagement and insight.

The EDS Reportis a template which is designed to give an overview of the organisation’s most recent EDS implementation and grade. Once completed, the report should be submitted via england.eandhi@nhs.net and published on the organisation’s website.

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| **Name of Organisation**  | University Hospitals of Northamptonshire – Kettering General Hospital and Northampton General Hospital | **Organisation Board Sponsor/Lead** |
| Paula Kirkpatrick |
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| **Name of Integrated Care System** | Integrated Care Northamptonshire |
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## NHS Equality Delivery System (EDS)

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| **EDS Lead**  | Matt Asbrey & Farhana Ahmedabadi-Patel | **At what level has this been completed?** |
|  |  |  |  | **\*List organisations** |
| **EDS engagement date(s)** | March – June 2023 | **Individual organisation**  |  |
|  |  |  | **Partnership\* (two or more organisations)** | Kettering General HospitalNorthampton General Hospital |
|  |  |  | **Integrated Care System-wide\*** |  |

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| **Date completed** | 18 December 2023 | **Month and year published**  | February 2024 |
|  |  |  |  |
| **Date authorised**  | 25 January 2024 | **Revision date** | N/A |
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EDS Rating and Score Card

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| Please refer to the Rating and Score Card supporting guidance document before you start to score. The Rating and Score Card supporting guidance document has a full explanation of the new rating procedure, and can assist you and those you are engaging with to ensure rating is done correctlyScore each outcome. Add the scores of all outcomes together. This will provide you with your overall score, or your EDS Organisation Rating. Ratings in accordance to scores are below |
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| **Undeveloped activity** – **organisations score out of 0** for each outcome | Those who score **under 8,** adding all outcome scores in all domains, are rated **Undeveloped**  |
| **Developing activity** – **organisations score out of 1** for each outcome | Those who score **between 8 and 21,** adding all outcome scores in all domains, are rated **Developing** |
| **Achieving activity** – **organisations score out of 2** for each outcome | Those who score **between 22 and 32,** adding all outcome scores in all domains, are rated **Achieving** |
| **Excelling activity** – **organisations score out of 3** for each outcome | Those who score **33,** adding all outcome scores in all domains, are rated **Excelling** |

## Domain 1: Commissioned or provided services

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| **Domain** | **Outcome** | **Evidence**  | **Rating** | **Owner (Dept/Lead)** |
| ***Domain 1: Commissioned or provided services*** | 1A: Patients (service users) have required levels of access to the service | Northamptonshire Integrated Care Board, reviewed Domain 1 in accordance with the aims of EDS 2022 aims. The two services selected for review were – 1. Diabetes (Community Care)
2. Chaplaincy

Diabetes Community Care is commissioned to Northamptonshire Healthcare Foundation Trust. Diabetes Community Care service was reviewed as ‘achieving’ across the Integrated Care Board. Chaplaincy is the provided services at Northampton General Hospital and Kettering General Hospital along with Spiritual Wellbeing at NHFT. This service was graded as ‘excelling’ across the Integrated Care Board |  | Northamptonshire Integrated Care Board |
| 1B: Individual patients (service users) health needs are met |
| 1C: When patients (service users) use the service, they are free from harm |
| 1D: Patients (service users) report positive experiences of the service |
| **Domain 1: Commissioned or provided services overall rating** |  |  |

## Domain 2: Workforce health and well-being

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| **Domain** | **Outcome** | **Evidence**  | **Rating** | **Owner (Dept/Lead)** |
| ***omain 2:*** ***Workforce health and well-being*** | 2A: When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions | * Staff have access to a range of confidential internal staff support services for their physical and mental health including Occupational Health, staff psychological wellbeing service, Single point for contact (SPOC) health and wellbeing access service and the preventative health and wellbeing service.
* Staff are able to access external confidential and independent support services such as Northants mental health talking therapies service IAPT specialist Long term conditions pathway that has psychological support for COPD, asthma and diabetes specifically, the ICN Long COVID support group and the Stronger Together NHS Staff Psychology Service.
* Staff can self-refer or receive a management referral to occupational health services and the SPOC service to address any health needs and workplace adjustments in response to having physical and mental health long terms conditions.
* Staff are able to self refer to the UHN Long Term conditions support group which is a psychology led 10 week rolling programme of peer support and psychoeducational sessions to support staff managing their long term conditions.
* Training for managers on how to have Health and Wellbeing Conversations has been introduced in 2022-23 and continues to be rolled out. The Group is currently consulting and co-producing a new policy for managing wellbeing and attendance at work, with the introduction of Health Passports amongst some of the new interventions.
* Staff are offered preventative health support through the H&WB services including smoking cessation, health awareness campaigns and reducing obesity through a referral into the NHS smoking cessation and digital weight management programmes. A preventative programme of management training, staff support sessions are available to learn more about mental health conditions and psychological 1st aid, and a programme of health and wellbeing champions are being developed to support and signpost teams and departments to be able to have up to date health information, signposting for support and peer support.
* Specialist Health Psychology services are available in the Staff Psychological wellbeing service to support staff with new diagnosis, symptom control and management and adjustment to long term conditions.
* There are gaps identified in services specifically to reflect the organisation’s changing ethnic profile. Links with more diverse service providers (e.g. SE Asian therapy provider) is being explored.
* OH services do not currently hold central records by health categories so grouped reports on key conditions (e.g. MH conditions) is not currently possible.
* SPOC H&WB services do no currently hold EDI data on referrals, but do record data on health conditions and mental health diagnosis.
 | Achieving | Health & Wellbeing Steering Group |
| 2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source  | * Both organisations have clear policies and processes in place and a clear governance process with the ‘Violence and Aggression Reduction Group (VARG)’ meeting monthly to receive reports and provide assurance to the Board.
* Links with Northamptonshire Police have been improved since 2022 with regular attendance at VARG meetings and an increase in prosecutions.
* Clear communication campaign launched with Northamptonshire Police; ‘Enough is enough’.
* Security is in place at both sites and are on hand to support where incidents are reported.
* Both organisations have seen an increase violence, aggression and abuse against staff as reported through the National Staff Survey. This is higher in minority groups, including Black, Asian and Minority Ethnic staff, and staff with Long-term conditions or a disability.
 | Developing | Health & Wellbeing Steering Group |
| 2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source | * Staff have access to a range of confidential internal staff support services for coping with workplace bullying and harassment and following any physical violence through multiple routes including self-referrals, management referral and a pathway of referral from the VARG working group reviewing violence and aggression incidents in the hospitals. These referrals are supported through the NGH SPOC H&WB service and Open Office Listening Service at KGH
* KGH Open Office Listening Service has a specifically commissioned BAME peer support worker – the role provides outreach H&WB service engagement with diverse cultural staff groups.
* Staff have access to the UHN Independent Domestic Violence Advocate (IDVA) commissioned by the ICN and based 4 days per week across the UHN hospitals. This provides specialist legal and safeguarding support for those experiencing DV.
* Staff are able to access external confidential and independent support services such as Northants mental health talking therapies service IAPT and the Stronger Together NHS Staff Psychology Service, Northampton Domestic Abuse Service (NDAS) and VOICE victim support services.
* Both organisations have trained TRIM (Trauma Risk Management) practitioners who are on hand to provide debrief and 1:1 TRiM assessments t for staff exposed to potentially traumatic incidents.
* Both sites have space for staff to relax and gain support; OurSpace at NGH and the Care Café in KGH.
* Both Hospitals have a Freedom to speak up (FTSU) guardian whose role is to provide independent advice and support to enable staff to speak up about concerns, including bullying and harassment.
* Both organisations have seen a slight decrease in bullying and harassment from other colleagues, including staff with protected characteristics. However, both organisations are worse than the national average, and have seen increasing rates of bullying, harassment and violence from the public.
 | Achieving | Health & Wellbeing Steering Group |
| 2D: Staff recommend the organisation as a place to work and receive treatment | * Across both Hospitals, the 21-30 age group was least positive about the organisation’s action on health and wellbeing (NSS q11a), with the 51-65 and 66+ age groups being most positive.
* Across both Hospitals, BAME staff were more likely to advocate on behalf of the hospital as a place to work and receive care, despite having poorer experiences at work (as detailed above).
* Work is underway through the ‘Be the change’ programme to improve the People experience in the organisation, with a key focus on: Values, Inclusion, Leadership and teamwork, and Reward and recognition.
 | Developing | Health & Wellbeing Steering Group |
| **Domain 2: Workforce health and well-being overall rating** | Developing |  |

## Domain 3: Inclusive leadership

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| **Domain** | **Outcome** | **Evidence**  | **Rating** | **Owner (Dept/Lead)** |
| ***Domain 3:*** ***Inclusive leadership*** | 3A: Board members, system leaders (Band 9 and VSM) and those with line management responsibilities routinely demonstrate their understanding of, and commitment to, equality and health inequalities | * Group CEOs, Directors of People and COOs all taking part in ICN Reverse Mentoring programme (ReMEDI project). Reverse mentoring offered in both Hospital sites
* Some staff networks have a nominated Executive Director who is their network sponsor. NGH Director of People is the system-lead for Equality, Diversity and Inclusion, demonstrating our commitment towards driving change in this area. Organisation has started work on it’s ‘Anti-racism’ delivery plan, with discussions held with both Boards
* Both Hospitals have been represented in the NHS Employers ‘Diversity Leaders Programme’ over the past 12 months and attended workshops virtually and in person.
* Training on a range of topics has taken place with both Boards, with further development planned across 2023-24 including Q Space training and Understand Race and Racism in the Workplace.
 | Underdeveloped | EDI Steering Group |
| 3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed | * Equality and Quality Impact Assessment (EQIA) process embedded. Every paper considered at board/committee meeting requires evidence of impact on inclusion. Strategic Risk on BAF
 | Underdeveloped | EDI Steering Group |
| 3C: Board members and system leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff and patients | * The board and committees are being aware of, understanding and monitoring the tools Year on year tracking and monitoring of WRES, WDES, EDS, AIS, Gender Pay Gap. Strategic Risk on BAF. Board receives 6 monthly report on delivery progress of Inclusion & Health Inequalities strategy delivery
 | Underdeveloped | EDI Steering Group |
| **Domain 3: Inclusive leadership overall rating** | Underdeveloped |  |

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| **Third-party involvement in Domain 3 rating and review** |
| **Trade Union Rep(s):**Trade Union Equalities Representative from the Chartered Society of Physiotherapists reviewed Domain 3 at an evaluation meeting on 18 December 2023  | **Independent Evaluator(s)/Peer Reviewer(s):**EDI representatives from Northamptonshire Healthcare Foundation Trust & Northamptonshire Integrated Care Board on 18 December 2023 |

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| EDS Organisation Rating (overall rating): Developing |
| Organisation name(s): University Hospitals of Northamptonshire |
| Those who score **under 8,** adding all outcome scores in all domains, are rated **Undeveloped** Those who score **between 8 and 21,** adding all outcome scores in all domains, are rated **Developing**Those who score **between 22 and 32,** adding all outcome scores in all domains, are rated **Achieving**Those who score **33,** adding all outcome scores in all domains, are rated **Excelling** |

**EDS Action Plan 2022-2023**

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| **EDS Lead** | Matt Asbrey & Farhana Ahmedabadi-Patel |
| **Period** | 2022 - 2024 |
| **EDS Sponsor** | Paula Kirkpatrick |
| **People Committee Approval** | 25 January 2024 |

**Domain1: Commissioned or provided services**

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| **Domian Outcomes** | **Objective** | **Action** | **Completion Date** |
| 1A: Patients (service users) have required levels of access to the service1B: Individual patients (service users) health needs are met1C: When patients (service users) use the service, they are free from harm1D: Patients (service users) report positive experiences of the service |  | Actions under Domain 1 for Chaplaincy Services have been developed in conjunction with Northamptonshire Integrated Care Board. Action plans can be viewed at the below link [Home | Integrated Care Northamptonshire (icnorthamptonshire.org.uk)](https://www.icnorthamptonshire.org.uk/) |  30 March 2027 |

**Domain 2: Workforce Health & Wellbeing**

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| **Domian Outcomes** | **Objective** | **Action** | **Completion Date** |
| 2A: When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions 2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source2D: Staff recommend the organisation as a place to work and receive treatment |  | * Review current offer of support for colleagues to manage long term health conditions
* Increased visual deterrents in patient areas to advise abuse of NHS staff will not be accepted.
* Posters to be displayed in clinical areas
* Create a Tackling Racism Strategy & Toolkit
* Create an Group Equality, Inclusion & Human Rights Policy
 |  30 September 2024 |

**Domain 3: Inclusive Leadership**

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| **Domian Outcomes** | **Objective** | **Action** | **Completion Date** |
| 3A: Board members, system leaders (Band 9 and VSM) and those with line management responsibilities routinely demonstrate their understanding of, and commitment to, equality and health inequalities3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed3C: Board members and system leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff and patients |  | * Board members to support staff networks through Exec sponsorship
* EDI Objectives added to Exec Appraisals.
* Exec support at engagement sessions for Tackling Racism.
* Support for launching Tackling Racism Strategy Launch
* Board Members to attend and actively support events including Black History Month, South Asian Heritage Month, LGBTQ+ History Month and Disability History month.
 |  30 March 2025 |