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# NHS Equality Delivery System 2022 EDS Reporting Template

Version 1, 15 August 2022

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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 leaders of 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 Report is 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](mailto:england.eandhi@nhs.net) and published on the organisation's website.

## NHS Equality Delivery System (EDS)

<b>Name of Organisation</b>	University Hospitals of Northamptonshire	<b>Organisation Board Sponsor/Lead</b>		
		Paula Kirkpatrick		
<b>Name of Integrated Care System</b>	Integrated Care Northamptonshire			

<b>EDS Lead</b>	Brad Scott/Farhana Ahmedabadi-Patel	<b>At what level has this been completed?</b>		
			<b>*List organisations</b>	
<b>EDS engagement date(s)</b>	April 2025 – April 2026	<b>Individual organisation</b>	University Hospitals of Northamptonshire NHS Group (Comprising of the below two Trusts)	
		<b>Partnership* (two or more organisations)</b>	Kettering General Hospital NHS Foundation Trust Northampton General Hospital Trust	
		<b>Integrated Care System-wide*</b>		

<b>Date completed</b>	04.06.2026	<b>Month and year published</b>	June 2026
<b>Date authorised</b>		<b>Revision date</b>	N/A



## EDS Rating and Score Card

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 correctly

Score 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

<b>Undeveloped activity</b> – organisations score out of 0 for each outcome	Those who score <b>under 8</b> , adding all outcome scores in all domains, are rated <b>Undeveloped</b>
<b>Developing activity</b> – organisations score out of 1 for each outcome	Those who score <b>between 8 and 21</b> , adding all outcome scores in all domains, are rated <b>Developing</b>
<b>Achieving activity</b> – organisations score out of 2 for each outcome	Those who score <b>between 22 and 32</b> , adding all outcome scores in all domains, are rated <b>Achieving</b>
<b>Excelling activity</b> – organisations score out of 3 for each outcome	Those who score <b>33</b> , adding all outcome scores in all domains, are rated <b>Excelling</b>





## Domain 1: Commissioned or provided services

**NOTICE:** In previous years, the review of EDS Domain 1 was led at system level by Integrated Care Northamptonshire (ICN), who coordinated data collection, analysis and community engagement to inform the assessment of commissioned and provided services. For this reporting cycle, the Integrated Care Board (ICB) confirmed it was unable to undertake or support the Domain 1 review due to organisational changes, including restructuring and transition to new system working arrangements. Within this context and taking into account significant winter operational pressures and ongoing organisational transformation activity, a Trust-led Domain 1 review has not been progressed within the reporting period.


Work is underway with system partners, including UHL, to align a consistent and sustainable future approach to Domain 1.

Domain	Outcome	Evidence	Rating	Owner (Dept/Lead)
<b>Domain 1: Commissioned or provided services</b>	1A: Patients (service users) have required levels of access to the service			
	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			
<b>Domain 1: Commissioned or provided services overall rating</b>				

## Domain 2: Workforce health and well-being

Domain	Outcome	Evidence	Rating	Owner (Dept/Lead)
<b>Domain 2: Workforce health and well-being</b>	2A: When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions	See attached presentation for evidence  Health and Wellbeing EDI Domain 2 Present	Achieving	Claire Hallas – Head of Health and Wellbeing
	2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source	See attached presentation for evidence  Health and Wellbeing EDI Domain 2 Present	Developing	Claire Hallas – Head of Health and Wellbeing
	2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source	See attached presentation for evidence  Health and Wellbeing EDI Domain 2 Present	Achieving	Claire Hallas – Head of Health and Wellbeing
	2D: Staff recommend the organisation as a place to work and receive treatment	See attached presentation for evidence  Health and Wellbeing EDI Domain 2 Present	Developing	Claire Hallas – Head of Health and Wellbeing
<b>Domain 2: Workforce health and well-being overall rating</b>			<b>Achieving</b>	

## Domain 3: Inclusive leadership

Domain	Outcome	Evidence	Rating	Owner (Dept/Lead)
<b>Domain 3: Inclusive leadership</b>	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	<ul style="list-style-type: none"> <li>• Equality Impact Considerations are included as part of the Group Cover sheet for all papers related to Board agenda items:  <div style="text-align: center;">             Group Cover Sheet            Revised October 2022         </div> </li> <li>• Chief People Officer (UHN) and Deputy Chief People Officer attended the Celebrating Diversity REACH Event on Saturday 5<sup>th</sup> October 2024.</li> <li>• Deputy Chief People Officer during this time period was the Senior Responsible Officer for the EDI System.</li> <li>• Chief People Officer is the co-chair of the ICN People Board.</li> <li>• Engagement and attendance at Civil Unrest Listening Events with Board Members chairing each event (6 in total) on the following</li> </ul>	Developing	Richard May – Trust Board Secretary

		<p>dates to listen to colleagues and their concerns:</p> <ul style="list-style-type: none"> <li>- Wednesday 7<sup>th</sup> August 2024 (chaired by Deputy CPO)</li> <li>- Thursday 8<sup>th</sup> August 2024 (Chaired by Deputy CPO)</li> <li>- Tuesday 10<sup>th</sup> September 2024 (chaired by Director of Governance)</li> <li>- Wednesday 2<sup>nd</sup> October 2024 (chaired by COO)</li> <li>- Tuesday 12<sup>th</sup> November 2024 (chaired by CPO)</li> <li>- Wednesday 11<sup>th</sup> December 2024 (chaired by Director of Transformation)</li> <li>• Board members have regular ward/department visits to speak to staff and patients and raise any EDI issues through the relevant Staff Networks or to the Board.</li> <li>• CEO (UHL and UHN), CEO (UHN), Chief Medical Officer, CPO and Deputy CPO attended British Association of Physicians of Indian Origin (BAPIO) conference on 11.10.2024 and gave updates/words of thanks.</li> <li>• Onam Festival attended by CEO (UHN and UHL), CPO and Chairman 14.09.2024</li> </ul>		
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		<ul style="list-style-type: none"> <li>• Asian Professionals National Alliance conference attended by CEO (UHN and UHL) 13 &amp; 14 Sept 2024.</li> <li>• NHS Confed Event – 03.12.2024 2024 Social Partnership Forum – Deputy CPO presentation on ongoing equality work with the Pride Network and through Rethinking Racism.</li> <li>• For a full outline of specific events attended by Board Members relating to the Staff Networks, please see Appendix 1.</li> <li>• From sampled appraisals, 77% (up from 50%) of Non-Executive Directors have an EDI objective as part of this. All other Non-Executive Directors have objectives relating to Culture &amp; Organisational Development to demonstrate commitment and accountability.</li> </ul>		
	<p>3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed</p>	<ul style="list-style-type: none"> <li>• Standing items on People Committee and Trust Board agenda for WRES and WDES data and action plans and Gender Pay Gap Report.</li> <li>• Review of Boards and committee's agendas were as follows: <ul style="list-style-type: none"> <li>- UHN Public Trust Board (6)</li> </ul> </li> </ul>	<p>Developing</p>	<p>Richard May – Trust Board Secretary</p>

		<ul style="list-style-type: none"> <li>- UHN Private Trust Board (10)</li> <li>- Group People Committee (10)</li> <li>- UHN Clinical Quality and Safety Committee (10)</li> </ul> <ul style="list-style-type: none"> <li>• Of all papers reviewed (36), 14 included items relating to equality and health inequalities (38.8%) up from 29%.</li> <li>• Examples of discussion regarding equality and health inequalities throughout include the following items: <ul style="list-style-type: none"> <li>- Board of Directors Meeting in Public (Part I) 04.10.2024 – Workforce Race and Disability Equality Standards Reports (WRES and WDES)</li> <li>- Board of Directors Meeting In Private (Part II) 07.02.2025 – Staff Survey Results</li> <li>- Standing Item/Report - Group People Committee (initial date 16.04.2024) – Culture and Safety Update (focus on Culture, People Promise and Rethinking Racism Education Programme)</li> <li>- Group People Committee 26.09.2024 - Workforce Race and Disability</li> </ul> </li> </ul>		
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		<p>Equality Standards Reports (WRES and WDES), Annual Equality Report</p> <ul style="list-style-type: none"> <li>- Group People Committee 30.01.2025 – Sexual Safety Charter Update and NSS 2024 results roll out discussion.</li> <li>- Group People Committee 27.02.2025 – Progress against the NHSE EDI Improvement Plan</li> <li>- UHN Clinical Quality and Safety Committee 29.05.2024 – subgroup report from NGH Patient Experience &amp; Carer Engagement Group</li> <li>- UHN Clinical Quality and Safety Committee 28.04.2024 – Report on ASD diagnostic assessments and how this affects children and young people in the county.</li> <li>- UHN Clinical Quality and Safety Committee 30.10.2024 – UHN British Sign Language (BSL) provision update.</li> </ul>		
	<p>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</p>	<ul style="list-style-type: none"> <li>• FTSU Guardians have regular meetings with the Chief Executive Officer.</li> <li>• WRES and WDES data improvements reported to Trust Board across 24/25</li> <li>• EDI Steering Groups took place for UHN on the following dates:</li> </ul>	<p>Developing</p>	<p>Richard May – Trust Board Secretary</p>

		<ul style="list-style-type: none"> <li>- Tuesday 30<sup>th</sup> April 2024 – KGH chaired by KGH CEO</li> <li>- Tuesday 2<sup>nd</sup> July 2024 – NGH chaired by Deputy CPO</li> <li>• Attendance and discussion as part of the Violence and Aggression Groups which is chaired by the Chief Nurse</li> <li>• Evidence from UHN’s WRES and WDES Reports indicate that the Board is not representative of the community we serve.</li> <li>• Due to major organisational change during this time-period, interventions and objectives are limited. Discussions around forming joint UHN networks were also taking place during this time as well as Executive Consultations.</li> </ul>		
<b>Domain 3: Inclusive leadership overall rating</b>			<b>Developing</b>	

<b>Third-party involvement in Domain 3 rating and review</b>	
<p><b>Trade Union Rep(s):</b> Trade Union Equalities Representative from the Chartered Society of Physiotherapists reviewed Domain 3 at an evaluation meeting on 19 December 2025</p>	<p><b>Independent Evaluator(s)/Peer Reviewer(s):</b> EDI representatives from Northamptonshire Healthcare Foundation Trust on 19 December 2025</p>

EDS Organisation Rating (overall rating): Within the context of Domain 1, scoring has temporarily been put on hold until UHN and UHL have an aligned and sustainable approach to Domain 1.

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	
EDS Lead	Year(s) active
Brad Scott/Farhana Ahmedabadi-Patel	2024-2025
EDS Sponsor	Authorisation date
Paula Kirkpatrick	

**NOTICE:** Within the context of Domain 1, action planning has temporarily been put on hold until UHN and UHL have an aligned and sustainable approach for this Domain.

Domain	Outcome	Objective	Action	Completion date
Domain 1: Commissioned or provided services	1A: Patients (service users) have required levels of access to the service			
	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	Outcome	Action	Completion date
<p style="text-align: center;"><b>Domain 2: Workforce health and well-being</b></p>	<p>2A: When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions</p>	<ul style="list-style-type: none"> <li>• UHN Single Point of Access (SPOA) for health and wellbeing services referral form to be re-designed to collect EDI data and OH EDI data to be merged to have a strategic oversight of referral diversity.</li> <li>• Commission a meal planning service available for all staff to access to support healthy food choices and easy of preparation. In conjunction, also support the introduction of the NHS 12 week weight management programme at UHN incorporating a physical activity and nutrition programme to promote healthy changes to improving lifestyle and reducing obesity.</li> <li>• Re-establish the UHN mental health awareness training for colleagues and line managers.</li> <li>• Service focus as part of the new UHN Health and Wellbeing Strategy is to address race health inequalities, identify gaps in health and wellbeing services and address as a priority. Develop an action plan to deliver change by collaboratively working with staff networks / UHN EDI team and Culture Lead.</li> </ul>	<p>April 2026</p> <p>March 2026</p> <p>January 2026</p> <p>March 2026</p>
	<p>2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source</p>	<ul style="list-style-type: none"> <li>• Develop and ratify a UHN Management of Unprofessional Behaviour at Work Standard Operating Procedure (SOP), with training and support for managers and HRBP guidance.</li> </ul>	<p>March 2026</p>

	2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source	<ul style="list-style-type: none"> <li>• Continue development of services from previous action plan.</li> </ul>	March 2026
	2D: Staff recommend the organisation as a place to work and receive treatment	<ul style="list-style-type: none"> <li>• Continue to have insight and involvement in change programmes and use insights from the National Staff Survey.</li> </ul>	March 2026

Domain	Outcome	Action	Completion date
<b>Domain 3: Inclusive leadership</b>	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	<ul style="list-style-type: none"> <li>• Board members to support staff networks through Executive sponsorship</li> <li>• EDI Objectives to be added to all Executive Appraisals.</li> <li>• Executive support at Rethinking Racism Education Programme sessions.</li> <li>• Support for launching We Belong strategy.</li> <li>• Board Members to attend and actively support events including Black History Month, South Asian Heritage Month, LGBTQ+ History Month and Disability History month.</li> </ul>	30 March 2026
	3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed		
	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		

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