

## Governing Body (public) meeting

DATE: 29 January 2015

<b>Title</b>	<b>Public Sector Equality Duty (PSED) – Annual report</b>	
Recommended action for the Governing Body	That the Governing Body:  <b>NOTE</b> the CCG Annual Equality Report 2014 - 15	
Executive summary	<p>This is the Clinical Commissioning Group's second Annual Equality Report. The report details how the CCG has met its statutory duties arising from the Equality Act 2010, which require public bodies to:</p> <ul style="list-style-type: none"> <li>• Publish information showing compliance with the Equality Duty on or before 31 January each year.</li> <li>• State their equality objectives</li> <li>• Update on progress on their action plan over the last year</li> </ul> <p>This report provides narrative evidence of progress made since January 2014 and sets out how the CCG has performed in meeting its duties. It sets out our legal responsibilities in demonstrating 'due regard' to the public sector equality duty's three aims and evidences how we have met the specific equality duty. It gives our four equality objectives and gives a range of examples of work undertaken to take account of the needs of our communities.</p> <p>It also looks at looks at plans for future development to improve the way we commission services and identifies areas for development.</p> <p>As well as demonstrating how we have met our duties this report demonstrates our commitment to commissioning for equal access to health care for vulnerable groups and for improving health outcomes for everyone.</p>	
Which objective does this paper support?	<b>Patients:</b> Improve the health and wellbeing of people in Bexley in partnership with our key stakeholders	✓
	<b>People:</b> Empower our staff to make NHS Bexley CCG the most successful CCG in (south) London	✓
	<b>Pounds:</b> Delivering on all of our statutory duties and become an effective, efficient and economical organisation	✓



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	<b>Process:</b> Commission safe, sustainable and equitable services in line with the operating framework and which improves outcomes and patient experience		✓
Organisational implications	Key risks <small>(corporate and/or clinical)</small>	Production of an Annual Equality Publication is a legal compliance responsibility on CCG's to evidence how they are meeting the public sector equality duty. Failure to publish a report could lead to loss of public confidence, particularly of vulnerable groups.	
	Equality and diversity	The Equality Act 2010 promotes equality and diversity in both service delivery and for public services as employers.  The implementation of PSED provides a means to monitor and review equality practice within the organisation and services we commission.	
	Patient impact	The Equality Act 2010 support better health outcomes for all and improved patient experience and outcomes.	
	Financial	There are no immediate financial implications arising from this paper.	
	Legal issues	Failure to undertake analysis and monitoring will result in a breach of compliance with the Public Sector Equality Duty.	
	NHS constitution	The Equality Delivery system for the NHS assists in delivery of the NHS constitution.	
	Consultation (public, member or other)	Not applicable	
Audit (considered/approved by other committees/groups)	N/A		
Communications plan	Upon approval the attached report will be published on the CCG website. It will also be shared with our Patient Council and stakeholder groups across Bexley.		
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Date	19 January 2015		

# **Bexley Clinical Commissioning Group**

## **Public Sector Equality Duty**

### **Annual Report**

**January 2014 - January 2015**

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## **Executive summary**

This is the second Annual Equality Publication produced by NHS Bexley Clinical Commissioning Group (CCG). It shows our commitment to promoting equality and reducing health inequalities.

Production of an Annual Equalities Publication is a key requirement of our obligations under the Public Sector Equality Duty (PSED) and evidences how we are compliant with the Equality Act 2010.

## **About this report**

This report brings together information that demonstrates how the CCG is meeting its statutory duties under the Equality Act 2010. It also helps to show the primacy given to considerations of equality and diversity in all our business and how it will embed into our activities over the next three years.

Information provided gives examples of work undertaken by the CCG to take account of the needs of our communities and identifies future areas for development. It also show progress the CCG has made since our first publication in January 2014

The full range of the CCG's activities in relation to equality, human rights and health inequalities are captured in in this annual equality report and our Equality Delivery System (EDS2) reporting framework, to be published later in the year.

## **Accessibility**

If you would like this document in another format or in another language, if you have any comments or feedback, or if you would like to get involved please contact Annie Gardner at [annie.gardner@nhs.net](mailto:annie.gardner@nhs.net) or [contactus@bexley.nhs.uk](mailto:contactus@bexley.nhs.uk)

## 1. Background

### **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 consists of general and specific duties:

The general duty requires public bodies to show due regard to:

- Eliminate unlawful discrimination
- Advance equality of opportunity
- Foster good relations

'Due regard' means that the CCG has given advanced consideration to issues of equality and prohibited discrimination before making any strategy, policy or key healthcare change decision that may potentially impact negatively on local protected characteristic groups.

Both general and specific duties are known as the Public Sector Equality Duties (PSED).

There are nine protected characteristics covered by the Equality Act:

Age	Disability	Gender re-assignment
Marriage & civil partnership	Pregnancy & maternity	Race, including national identity and ethnicity
Religion or belief	Sex (that is male or female)	Sexual orientation

### **Specific Duties for Clinical Commissioning Groups (CCGs )**

Together with the general duties CCGs have specific duties under the PSED. CCGs are required to publish in a manner that is accessible to the public:

- Information to demonstrate their compliance with the public sector Equality Duty, at least annually.
- Equality objectives at least every 4 years, starting by 13<sup>th</sup> October 2013. All such objectives must be specific and measurable.

### **Equality Deliver System (EDS) and EDS2**

The Equality Delivery System was designed by the Department of Health to assist staff and NHS organisations understand how equality can drive improvements and strengthen accountability of services to patients and the public.

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EDS2 was developed to be more flexible and adaptable and is applicable to all commissioner and provider organisations. It also provides robust evidence of how the public sector Equality Duty is being met.

EDS 2 consists of four goals and 18 outcomes. The goals are:

1. Better health outcomes
2. Improved patient access and experience
3. A representative and supported workforce
4. Inclusive leadership

The 18 outcomes are divided into two sections patients and workforce. Each of the two sections has a sub set of nine outcomes. The implementation of EDS2 relies upon a robust programme of activities and provides a nine step tool in order to achieve compliance.

## **2. Organisational context**

### **NHS Bexley Clinical Commissioning Group**

Bexley CCG is a commissioning organisation; we plan and buy health services for Bexley residents. The CCG came into existence on the 1st April 2013 and is made up of member practices working together with other clinicians and patients, to decide how the local NHS budget should be spent.

The CCG serves around 230,000 people registered at 27 GP Practices across the borough. Our GPs understand the health needs of their patients, and we believe this local approach to commissioning helps ensure good quality services that meet the needs of the population

As a membership organisation the CCG's member practices work closely to discuss common problems that are arising and to see how local services can be improved and better co-ordinated. The CCG also recognises that as commissioners of services we must account for not only our own organisational equality performance but also that of the providers of services that we commission.

### **Equality governance**

Governing Body members have a collective and individual responsibility to ensure compliance with PSED, which in turn secures the delivery of successful equality outcomes for us both as a commissioner and an employer.

The Director of Governance and Quality has executive accountability for equality; the Head of Patient Experience has operational responsibility. They will ensure the CCG is meeting its legal responsibilities.

### **3. Equality Objectives**

In 2013/14 stakeholders and a range of community groups, along with representatives from the CCG Governing Body, agreed the following equality objectives for the CCG.

- To embed the PSED into the work of the organisation via effective governance arrangements and appropriate training
- To put the general equality duty into practice across the organisations functions including policy and decision making, engagement and commissioning
- To ensure the specific requirements of the PSED are met by publishing objectives every four years and information on progress annually
- To develop the Equality and Diversity Focus Group with representation from patients and the public

These objectives set the strategic focus for the CCG's work on equality and diversity.

A subsequent meeting identified further areas for consideration in our equality work; these reflect local priorities for the Bexley community.

The areas identified were:

1. Focus on prevention and inequalities
2. Development of services at Queen Mary's and Erith Hospitals
3. Management of long term conditions
4. Development of adult services (focusing on elderly people)

### **4. Equality information on our workforce**

Managers and staff have a joint responsibility to ensure that no employee or job applicant is discriminated against or harassed in relation to any of the protected characteristics as defined by the Equality Act.

The CCG is committed to promoting equality, opportunity and respecting the diversity of our staff. There are systems and processes in place to ensure all our staff have equality of opportunity to be considered for employment, training and promotion, these include:

- HR Policies including
  - Recruitment
  - Whistleblowing
  - Grievance
  - Bullying and Harassment
  - Equality and Diversity in Employment
- Exit interviews



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- Yearly appraisals, 6 monthly reviews and regular one to one's
- Staff surveys and regular staff meetings
- Mandatory Equality and Diversity training, which raises staff awareness about equality and diversity issues

We are not required to publish workforce data as we have fewer than 150 staff. Data is collected that is used to monitor the profile of staff to identify areas of disproportionality and for workforce planning. The Executive Management Committee review this staff data quarterly. We are therefore able to ensure that our recruitment, selection and training policies are fair and equitable and that our workforce is protected from discrimination because of protected characteristics.

### **5. Equality information on our ways of working**

The CCG requires all staff to undertake mandatory equality and diversity training. Training is provided via an online module which staff need to pass.

The CCG considers equality when developing our policies, presenting papers to Governing Body and when formulating proposals for changes to services. This is to ensure that these do not discriminate against protected groups and to identify opportunities to promote equality.

We require providers to meet equality and diversity legislative requirements as part of the procurement process for new or revised commissioning contracts. Our premises are accessible and we ensure that all our public meetings are held in accessible premises.

#### **Complaints and serious incidents**

The Patient Experience Team deal with queries, concerns and formal complaints relating either to the commissioning of services or to services commissioned by the CCG. Equality and Diversity monitoring is an important source of information helping us to identify whether certain groups experience problems disproportionately to other groups. Intelligence gathered is analysed and brought together in quarterly insight reports so trends and themes can be identified and addressed

All serious incidents (SIs) from NHS providers, which are reported onto STEIS are reviewed by our Quality Team. This means we are able to triangulate data with other information (including complaints data) to see if any group is disadvantaged or impacted upon. Additionally intelligence gained is used to influence contract monitoring and quality safety standards.

#### **Communications and engagement**

Section 242 of the NHS Act 2006 placed a statutory duty on NHS organisations to involve and consult patients and the public in the planning of service provision, the development of proposals for change and decisions about how services operate. Section 24A places a duty on NHS organisations to report on consultations and the

influence on commissioning decisions. These have subsumed in the Health and Social Care Act 2012.

Our patient experience team engage regularly with local groups and organisations representing the nine protected characteristics through focus groups, attending community interest forums and holding meetings relating to commissioning projects.

Representatives from the team have focused on attending local community groups this year to discuss current projects and wider consultation, as well as presenting information that is relevant to these groups. For example the engagement team recently attended a variety of groups to share key messages about accessing out of hours and unscheduled care to a wide variety of groups including older people and representatives from BME communities.

Patient engagement activity is reported to the Patient Council and Governing Body on a quarterly basis.

The CCG continually reviews the ways in which it involves local people, including those from diverse groups in decision making and use a variety of methods to attract participation. A great deal of work has been carried out to increase and enrich involvement ranging from grass roots community involvement to large scale public/community events.

Effort is made to engage with seldom heard groups by contact through existing forums and representative groups in Bexley. We recognise the importance of enabling these groups to be involved in their preferred local communities where they feel most comfortable and supported. We go to specific community meetings by arrangement (e.g Community Forums, Haven, BME groups and the Youth Council).

Our communication and engagement strategy includes mechanisms to ensure all patients and communities can get involved and influence decisions.

The Assistant Director Communications and Corporate Services and Head of Patient Experience have been working together to deliver a programme of engagement and communication activities. In addition the patient experience team has established links with seldom heard groups in Bexley to discuss equality issues and agree/identify next steps.

Evidence shows that engagement activities have been diverse and wide ranging in engagement with user groups, including carers, people with learning disabilities, young people, multifaith forums local residents and key partners such as Bexley Voluntary Service Council (BVSC) and Healthwatch.

Examples of engagement reaching groups with protected characteristics

- Involvement of patients in service re-design and evaluation – MSK, Cardiology and Urgent Unscheduled Care.
- We have a Patient Council, which has representation from most protected characteristic groups. The Council meets every 6 – 8 weeks and is well

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attended by representatives from across the community. The PPI Lay Member is chair of this group and also sits on the Equality Steering Group

- We have conducted outreach with other 'seldom heard groups including students, a traveller group, the Asian Women's Group and a Lesbian and Gay group.
- We continue to publicise commissioning plans and campaigns supporting NHS priorities including, Call to Action, Not always A&E, South East London Commissioning Strategy via our website, social media, outlets, stakeholder meetings and our stakeholder briefing
- We are currently working with our BME community representatives to arrange a health information event.

People can become involved with the CCG in a number of ways, including attending meetings and events, sharing views through focus groups or surveys or by joining our Mystery Shopper scheme.

The engagement and communications team has built a comprehensive stakeholder distribution list, this helps ensure information about local health care and opportunities for involvement are disseminated widely throughout the borough.

We also use a number of online platforms to engage with the public, our staff and GP members, including: Public website ([www.bexleyccg.nhs.uk](http://www.bexleyccg.nhs.uk)); staff intranet; GP extranet (GP zone); Twitter and You Tube

Future plans for engaging with protected characteristic groups includes

- working with commissioners to gather evidence and embed EDS2 in the commissioning cycle
- developing a time table of meetings with groups interested in being more involved in the work of the CCG

## **6. Commissioning intentions, tenders, contracts and performance monitoring**

The CCG buys a range of health care to meet the needs of the people of Bexley. We develop plans every year setting out the CCG priorities, these are called Commissioning Intentions.

The CCG considers equality information including data found in the Joint Strategic Needs Assessment (JSNA) when developing commissioning plans, undertaking service design, redesign and strategic developments

Equality analysis is built into the CCG commissioning processes and is carried out as part of the development of commissioning intentions to ensure equality is at the heart of the process. This ensures no part of the population is disadvantaged in terms of access and health outcomes.

The contracts and tendering process includes specific requirements around equalities and this offers assurance that commissioners and providers are taking account of their responsibilities. It also enables the organisation to monitor how different communities access services and establish mechanisms to address any inequalities.

## **7. Equality progress in Bexley**

The CCG has an Equality and Diversity Strategy and action plan to support delivery of its statutory responsibilities. The Strategy was designed in response to the requirements of the Equality Act 2010 and to meet the requirements of the NHS Equality Delivery System (EDS).

### **Summary and progress during 2014/15**

- Equality and Diversity Strategy in place
- Published equality objectives
- Equality analysis is a compulsory aspect of all commissioning decisions
- CCG Staff have undertaken Equality and Diversity training
- The CCG has encouraged active engagement with patient participation groups, community forums and Bexley Patient Council
- Develop/update equality action plan
- Process begun to form a community based Diversity Champions Group to ensure better and more effective engagement /consultation with communities in respect of equality issues
- Key stakeholders from protected characteristic groups have been identified and involved in service redesign and commissioning new services

### **In 2015/16 the CCG will focus on developing key activities including:**

- Improving equality data collection and usage to inform commissioning decisions and improve any health inequalities for our protected groups.
- Continue to educate and train staff and Governing Body members in the principles of Equality and Diversity
- Ensure on-going senior leadership and awareness of equality agenda for CCG and member practices
- Review different ways to ensure that all parts of the community (including protected/minority groups) are actively engaged with the CCG
- Develop equality steering group
- Host equality and diversity community event/roadshow

- Revise the Equality and Diversity strategy

The PPI Lay member and Patient Champions represented through Bexley Patient Council regularly challenge the work of the CCG to ensure people from protected groups have been considered in all decision making.

The CCG will continue to use the NHS Equality Delivery System to assess performance. The aim is to achieve at least a developing/amber grade, if not an achieving/green grade. We will report on our performance in the autumn of 2015.

## 8. Equality action plan

The Equality action plan was agreed in March 2014. Below is a summary on the six key areas for action showing how they are reflected in the objectives, followed by an update of progress against these objectives.

	Action	Update
1	Ensuring the CCG is legally compliant with the Equality Act 2010	Objective 3  Actions A - B
2	Ensuring agreed equality objectives feature in all aspects of the CCG's activity, especially when commissioning services	Objective 2  Action A - B
3	Undertaking timely Equality Impact Assessment (EqIA) whenever new project, proposals or policies, commissioning and strategies are being developed	Objective 1&2
4	Engaging with diverse communities	Objective 4  Action A
5	Training in equality and diversity for all staff	Objective 1  Action C
6	Effective governance arrangements for equality and diversity work	Objective 3  Action C

Objectives	Specific action/deliverables	Update/notes
<b>1. Embed the PSED into the work of the organisation via effective governance arrangements and appropriate training.</b> (Meet statutory requirements of the Equality Act)		
	A. CCG has a robust Equality Impact Assessment (EqIA) process for all commissioning and business cases	All business cases include an EQIA as part of the process. This is assessed at all stages of the committee approval process
	B. The Quality and Safety sub-committee ensure all new proposals and business cases are accompanied by robust EqIA	The EqIA involves a comprehensive check list for completion and the Quality Impact Assessment includes ensuring compliance with relevant Policy/Guidance/ Procedures, particularly compliance with the Equality and Diversity Act 2010
	C. All CCG staff are aware of and understand equality diversity and human rights	All staff provided with access to online equality and diversity training toolkit. Annual updates/refresh to be undertaken
<b>2. To put the general equality duty into practice across the organisations functions including policy and decision making and commissioning</b>		
	A. CCG ensures all commissioning and business case proposals are accompanied by robust EqIA	All business cases include a EQIA as part of the process. This is assessed at all stages of the committee approval process
	B. CCG ensures all contracts include reference to compliance with Equality Act 2010	Standard NHS contracts template adopted which includes provision and requirement to comply with the Equality Duty. Where this

		<p>provision is not contained the contract will be reviewed making all providers that we commission from aware that all contracts would be subject to the requirements of the Equality Act</p> <p>We use the NHS Standard Contract, with Equality Duty, and this will continue with the forthcoming national contract variation for 2015/16.</p>
<p><b>3. Ensure the specific requirements of the PSED are met by publishing objectives at least every four years and information on progress annually</b></p>		
	A. The CCG publishes annual equality information	Information first published Jan 14 Refreshed report published Jan 15
	B. The CCG has identified and published equality objectives	Equality objectives were agreed in 2014.
	C. The CCG has effective governance arrangements for equality and diversity work	Work will be reviewed by Quality and Safety Committee. This will provide assurance to the Governing Body that the CCG is fulfilling its equality goals and objectives
<p><b>4. Develop Equality and Diversity Focus Group with representation from patients and public – ensuring robust governance arrangements for engagement and sharing information with the Governing Body</b></p>		
	A. Promote diversity and inclusion in the engagement of patients and provision of accessible information	Communications and Engagement strategy to be refreshed in 2015

	<p>B. Establish Equality and Diversity Focus Group with representation from all areas of the community.</p>	<p>A range of stakeholders have been consulted and invited to join Equality Champions group.</p> <p>Terms of reference for the group to be developed</p> <p>Community roadshow/engagement event and audit of patient experience planned for May 2015</p>
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