



Bexley

Clinical Commissioning Group

**EQUALITY DELIVERY
SYSTEM (EDS2)**

**ANNUAL PROGRESS REPORT -
2017**

Introduction:

The Equality Delivery System (EDS2) is a performance improvement tool to monitor and improve performance on equality and diversity across four domains or 'goal':

- Better health outcomes
- Improved patient access and experience
- A representative and supported workforce
- Inclusive leadership

EDS2 helps CCGs meet its public sector equality duty by reviewing equality performance on each of these goals annually through evidence gathering and engagement with a range of stakeholders and staff. Following engagement the CCG identifies and agrees a grade for each of the goals (and subsets). The purpose of the assessment is to ensure the CCG is transparent, accountable and continuously improving.

Using the EDS2 toolkit NHS Bexley undertook a self-assessment and in this report sets out how it has achieved against the goals.

Summary:

Overall against the EDS2 goals the CCG rated as:

Goal 1	BETTER HEALTH OUTCOMES	Developing
Goal 2	IMPROVED PATIENT ACCESS AND EXPERIENCE	Achieving
Goal 3	A REPRESENTATIVE AND SUPPORTED WORKFORCE	Achieving
Goal 4	INCLUSIVE LEADERSHIP	Developing

The CCG Board lead for EDS2: Paul Cutler, PPI Lay Member

The CCG EDS2 lead: Annie Gardner, Head of Patient Experience & Equalities

The following stakeholders were engaged in development and grading of this process:

- Representatives from Bexley Patient Council (including Healthwatch Bexley and Bexley Voluntary Services Council)
- CCG staff (Commissioning, Communications, Organisational Development)
- Equality steering group

The CCG reviewed its equality objectives in May 2017 and agreed new objectives for 2017 – 2021, which are:

	Objective	Links to EDS2 Goal
1	Reducing inequalities in commissioning	<i>Better health outcomes</i>
2	Improved access to healthcare for vulnerable groups	<i>Improved patient access and experience</i>
3	Empowered, engaged and well supported staff	<i>A representative and supported workforce</i>
4	Demonstrating commitment to equality	<i>Inclusive leadership</i>

EDS2 Framework

Goal 1. BETTER HEALTH OUTCOMES		
1.1	<p>Services are commissioned, procured and designed and delivered to meet the health needs of local communities</p> <p>STP based on comprehensive needs analysis which identified health needs of local communities Information from the JSNA informs the local commissioning requirements of the CCG</p>	DEVELOPING
1.2	<p>Individual peoples health needs are assessed and met in appropriate and effective ways</p> <p>STP based on comprehensive needs analysis which identified health needs of local communities Information from the JSNA informs the local commissioning requirements of the CCG</p> <ul style="list-style-type: none"> ○ Contract monitoring and programme boards ○ Safeguarding boards ○ CQRG, CQUINS, FFT and NHS Choices 	
1.3	<p>Transitions from one service to another for people on care pathways are made smoothly with everyone well informed</p> <p>A key aspect of our work is to improve commissioning of end to end pathways to ensure that transitions are smooth and that patients/ carers feel fully informed about the provision of their care.</p>	DEVELOPING
1.4	<p>When people use NHS services their safety is prioritised and they are free from mistakes, mistreatment and abuse</p> <p>There is an extensive system within the CCG for reviewing and reporting on patient experience, clinical effectiveness and patient safety. Key areas such as infection control, incidents and safeguarding within the commissioned services and this is regularly reported to the Quality and Safety committee and the Governing Body. The CCG has carried out a review of children’s safeguarding processes. Through clinical quality review meetings with providers, the CCG monitors and reviews the triangulation of information relating to complaints, incidents, staffing and skill mix and key areas of harm e.g. pressure ulcers, falls and medication incidents. This process also identifies themes and trends and provider actions and learning against these. The CCG review all provider action plans in relation to serious incidents prior to approving formal closure. Sharing of learning is encouraged across providers and a learning event is being planned for the coming year The contract carries clauses and KPIs protecting patient from harm and have responses for breaches, intended or otherwise. National and local CQUINS relate to areas where quality and safety can be improved through innovative practice</p>	

1.5	<p>Screening, vaccination and other health promotion services reach and benefit all local communities</p> <p>Health promotion is led by Public Health with CCG support (where possible) and is focused on communities which have been identified where there are particular health issues.</p> <p>Vaccinations are commissioned by NHS England.</p> <p>Services are contracted with specific requirements on how providers will offer their services to all our population with emphasis on how they will ensure this includes hard to reach people.</p>	DEVELOPING
Goal 2. IMPROVED PATIENT ACCESS AND EXPERIENCE		
2.1	<p>People, carers and communities can readily access hospital, community health or primary care services and should not be denied access on unreasonable grounds</p> <p>The CCG can demonstrate good practice in place to ensure patients can access services and to address complaints and issues that may arise. There has been a lot of work to establish engagement opportunities and the CCG work in partnership with the local community and local partners to improve communication and to get feedback from patients and the public which is then incorporated into the commissioning processes.</p> <p>Contracts include national standards and local KPIs which address equity of access and the commissioning process ensures that services are pathway devised so that they do not exclude any groups of people.</p> <p>A Patient and Pubic Engagement Forum has been set up to enable two-way communication between patients, carers, partner agencies, the local community and the CCG. The group supports the CCG in making sure that the experiences and the feedback from patients and the public informs the commissioning decisions and service developments and improvements. This is part of the formal structure of the CCG to inform the Governing Body's commissioning decisions.</p> <p>Supported by the CCG most GP practices have set up Patient Participation Groups who encourage feedback from patients about concerns relating to their individual practices and also local health services, to enable this perspective to also inform commissioning of services.</p> <p>Representatives from these groups link into Bexley Patient Council whose remit is to look at services across the whole of the borough and share feedback on patient experiences.</p>	ACHIEVING

2.2	<p>People are informed and supported to be as involved as they wish to be in decisions about their care</p> <p>Contacts include policies and processes agreed to support open and free access to communication about a person's own care. The principles of the NHS Constitution are the basis of all NHS contracts and states that it should support individuals to promote and manage their own health.</p> <p>NHS services must reflect, and should be co-ordinated around and tailored to the needs of patients, their families and their carers.as appropriate, will be involved in and consulted on all decisions around their care and treatment. The NHS actively encourages feedback, patients and staff, welcome it and use it to improve services.</p> <p>The CCG provides a Patient Experience service and supports patients should they require help and will sign post them to the appropriate place.</p> <p>The GP survey reports good levels of patient satisfaction with their involvement in decision-making in their care.</p> <p>The CCG Communications and Engagement Strategy sets out the organisations commitment to improving communication with patients and the public and to continuously seek patient feedback and experiences.</p> <p>The Patient Council supports the CCG in making sure that the experiences and the feedback from patients and the public informs the commissioning decisions and service developments and improvements.</p>	ACHIEVING
2.3	<p>People report positive experiences of the NHS</p> <p>The CCG can demonstrate good practice is in place to ensure patients can access services and to address complaints and issues that may arise.</p> <p>There has been a lot of work to establish engagement opportunities and the CCG work in partnership with the local community and local partners to improve communication and to get feedback from patients and the public which is then incorporated into the commissioning processes.</p> <p>Complaints and Mystery Shopper issues are handled in house and complaint relating to provider organisations are addressed through contract meetings and commissioning processes.</p> <p>The friends and family test' which measures patient experience is included in each contract and there is performance related monitoring on patient related complaints.</p>	ACHIEVING

2.4	<p>People's complaints about series are handled respectfully and efficiently</p> <p>Our complaints service is provided in house. Many enquiries are dealt with immediately and the CCG is used as a signposting organisation using the 4 Cs as described by the Department of Health: complaints, comments, concerns and compliments about services will be handled respectfully and efficiently in compliance with the Complaints Handling Policy & Procedure. Providers must notify commissioners within 2 days of any independent investigations (e.g. PHSO). The CCG monitors the complaints processes of the providers it commissions services from. The contracts contain compliance requirements for providers to produce a sample of complaint letters and responses, to the commissioner.</p>	ACHIEVING
Goal 3. A REPRESENTATIVE AND SUPPORTED WORKFORCE		
3.1	<p>Fair NHS recruitment and selection processes lead to a more representative workforce</p> <p>Good practice is in place with regards recruitment and pay and workforce data is regularly reviewed by the Governing Body. Recruitment and payroll processes are delivered by an SLA held with South East Commissioning Support Unit. Statistics are provided to the CCG which reflect the equalities responses to questions as raised on the standard NHS application form and reports on the protected characteristic staff groups are also shared with the Governing Body. The CSU highlights to managers any disabled applicant who should be considered under the two ticks guaranteed interview scheme. Contracts carry workforce related clauses and KPIs linked to national standards by service e.g. maternity requiring midwife ratio to patient and the CCG receives workforce assurance reports from the provider organisations</p>	ACHIEVING
3.2	<p>The NHS is committed to equal pay for work of equal value and expects employers to use equal pay audits to help fulfil their legal obligations</p> <p>New roles are banded/evaluated under Agenda for Change (A4C). Agency staff wages are compared and in line with A4C bandings.</p>	ACHIEVING
3.3	<p>Training and development opportunities are taken up and positively evaluated by all staff</p> <p>Current figures indicate that all CCG staff have completed the Equality and Diversity e learning module. Individual areas for training and development are agreed with staff through PDP's and appraisal. Training requests are encouraged and regular notification of training is shared with all staff.</p>	ACHIEVING
3.4	<p>When at work staff are free from abuse, harassment, bullying and violence from any source</p> <p>The CCG has policies to cover bullying and harassment. The CCG works with the staff network to track bullying and harassment in the workplace. We have also updated our whistleblowing policy and encourage staff to talk to their manager or staff network if they have any issues/concerns.</p>	ACHIEVING

3.5	<p>Flexible working options are available to all staff consistent with the needs of the service and the way people lead their lives</p> <p>The CCG has developed family friendly policies and adopted a flexible working policy. Staff can discuss local arrangements with their line manager.</p> <p>Staff reps are being involved in review and update of relevant flexible working policy</p>	ACHIEVING
3.6	<p>Staff report positive experiences of their membership of the workforce</p> <p>HR policies are available to staff on the intranet and occupational health support is provided by the CSU. This includes a 24 hour employee assistance programme, which the CCG promotes regularly and many staff have taken advantage of.</p> <p>Staff health and wellbeing is addressed through the Staff Network and provides an opportunity for staff to raise issues or concerns relating to working conditions, safety or the working environment.</p> <p>The Staff Network includes representatives from each directorate and enhances staff engagement, contributes to creating the desired organisational culture, provides an opportunity to disseminate information and for the discussion of issues such as making suggestions to managers as to how the environment might be improved.</p>	ACHIEVING
Goal 4. INCLUSIVE LEADERSHIP		
4.1	<p>Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations</p> <p>In undertaking the EDS review and developing equality objectives, the Governing Body is demonstrating their commitment to equality and diversity and compliance with equality legislation.</p> <p>There are processes in place for regular reporting and monitoring of equality issues. Key organisational strategies demonstrate the CCGs commitment to commissioning good quality services that meet the needs of the local population and improve the health of that population.</p> <p>The Governing Body have demonstrated their commitment to equality by commissioning a review of the EDS and development of the equality objectives.</p> <p>The Governing Body regularly receive reports and updates on equality progress and workforce intelligence.</p>	DEVELOPING
4.2	<p>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.</p> <p>The front sheet of papers presented to the Governing Body, require assurance regarding equality issues and impact.</p> <p>Directors must sponsor papers and are responsible for assuring each document presented.</p>	DEVELOPING
4.3	<p>Middle managers and other line managers support staff to work in culturally competent ways within a work environment free from discrimination</p> <p>Equality and diversity training is one of the CCG mandatory modules. Equality workforce data is reported to the Governing Body as part of the quarterly staff report. The CCG is also working with Bexley Council to learn more about demographics of people within the borough. Various speakers attend staff away day, e.g. Kent association of the blind, Deaf awareness, and help staff to learn more about the needs of local people and the diversity within the Bexley community.</p>	DEVELOPING

Progress on the CCG's equality and diversity work - 2017

The CCG is developing a comprehensive equality and diversity work plan, which is monitored by the Equality Steering Group.

Since January 2017 the CCG has delivered progress in the following areas:

- Identify Governing Body lead for equality and diversity
- Develop Equality Steering Group - review membership and terms of reference
- Identify & agree refreshed equality objectives for 2017 - 2021
- Progress EDS2
- Collect equality monitoring information during engagement activities
- Work collaboratively with Bexley Council – equality focus
- Member of Equality Partnership Board for Bexley borough

Equality Steering Group (ESG) – ‘draft’ work plan 2018

Objective & Action		Lead
Equality and health inequalities awareness/training	Review equality training needs for governing body Consider conscious bias training /workshop Develop guidelines for staff to use as part of the commissioning process	Paul Cutler Lucy McCafferty Annie Gardner
Equality Strategy & EiA process	Review and update equality strategy and EiA process	Annie Gardner
Review quality visit assurance programme to include review of mechanisms to monitor protected characteristics and implementation of AIS	Engage with CCG lead for assurance visits & review patient experience data	Annie Gardner (& Quality team)
Protected characteristic – deep dive programme	Undertake three deep dives per year into a protected characteristic area to help CCG understand gaps and identify improvements to enhance the patient experience	Annie Gardner (patients and community groups)
Map population profiles	Link with JSNA and BVSC to identify central document that maps diverse groups and population in Bexley	Annie Gardner