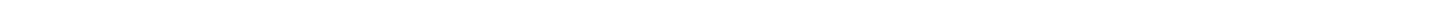NHS Equality Delivery System 2022

Wirral Community Health and Care NHS Foundation Trust EDS Report 2022

Version 1, 15 August 2022

Contents

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/

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 and published on the organisation's website.

NHS Equality Delivery System (EDS)

Name of Organisation	Wirral Community Health & Care NHS Foundation Trust	Organisation Board Sponsor/Lead
		Paula Simpson
Name of Integrated Care System	Cheshire & Merseyside ICB	

EDS Lead	Neil Perris, Head of Inclusion & Health Equity		At what level has this been completed?	
				*List organisations
EDS engagement date(s)	17.01.2023		Individual organisation	
			Partnership* (two or more organisations)	
			Integrated Care System-wide*	Bridgewater Community Health NHS FT East Cheshire NHS Trust Liverpool Heart and Chest Hospital NHS FT Liverpool University Hospital NHS FT Liverpool Womens Hospital NHS FT Mersey Care NHS Mid Cheshire NHS Trust

				Southport and Ormskirk Hospital NHS Trust Warrington and Halton Hospitals NHS FT Wirral Community Health and Care NHS FT Wirral University Teaching Hospital NHS Trust

Date completed	23.02.23	Month and year published	Feb/March 2023
Date authorised	12.04.23	Revision date	

Completed actions from previous year	
Action/activity	**Related equality objectives**
This is a new version of EDS	Inclusion Strategy 2022-2027 - Wirral
The Inclusion and Health Inequalities Strategy 2022-27 was developed following completion of the last version of EDS and is available on the trust's website.	Community Health and Care NHS Foundation Trust (wchc.nhs.uk)

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

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

Domain	Outcome	Evidence	Rating	Owner (Dept/Lead)
	1A: Patients (service users) have required levels of access to the service	**Community Cardia Rehab** ICS Service Line Review template completed assessing accessibility against all protected characteristics including data from AIS/Inclusion template	2	Neil Perris – Head of Inclusion & Health Equity /Nicola Williams – Service Lead
		Bladder & Bowel (Adults & Pead's) Geographical mapping of referrals matching levels of deprivation (IMD). Access examined and examples of improvements/adjustments for each protected characteristic given	2 **Overall 2**	Neil Perris - Head of Inclusion & Health Equity /Janice Evans - Service Lead
	1B: Individual patients (service users) health needs are met	**Community Cardia Rehab** Evidence of range of services with adjustments and differing access options. Evidence of personalisation of care.	2	Neil Perris – Head of Inclusion & Health Equity /Nicola Williams – Service Lead
		Bladder & Bowel (Adults & Pead's) Use of AIS/Inclusion template highlighted and reasonable adjustments recorded and implemented. Inclusion improvement programmes e.g Rainbow Pin Badge.	2 **Overall 2**	Neil Perris - Head of Inclusion & Health Equity /Janice Evans - Service Lead

	1C: When patients (service users) use the service, they are free from harm	**Community Cardia Rehab** Summary of relevant governance, health & safety info, incident and risk management procedures, psychological safety and leadership	3	Neil Perris – Head of Inclusion & Health Equity /Nicola Williams – Service Lead
		Bladder & Bowel (Adults & Pead's) Summary of relevant governance, health & safety info, incident and risk management procedures, psychological safety, and leadership	2 **Overall 3**	Neil Perris - Head of Inclusion & Health Equity /Janice Evans - Service Lead
	1D: Patients (service users) report positive experiences of the service	**Community Cardia Rehab** 95.6% Positive FFT feedback Patient quotes	2	Neil Perris – Head of Inclusion & Health Equity /Nicola Williams – Service Lead
		Bladder & Bowel (Adults & Pead's) FFT scores and positive experience quotes highlighting adjustments and personalisation of care from service users	2 **Overall 2**	Neil Perris - Head of Inclusion & Health Equity /Janice Evans - Service Lead
Domain 1: Commissioned or provided services overall rating			**Achieving (9)**	

Domain 2: Workforce health and well-being

Domain	Outcome	Evidence	Rating	Owner (Dept/Lead)
	2A: When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions	The organisation targets reading materials about the mentioned health conditions to staff about the mentioned conditions. The organisation promotes work-life balance. The organisation signposts to national support	2	Emma Ashley – Head of HR
	2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source	Zero tolerance in place when issues of abuse from patients/ visitors towards staff The organisation penalises staff found to have bullied and harassed others Encouraged FTSU champions with protected characteristics	2	Emma Ashley – Head of HR
	2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source	Referral process to OH Supporting Mental Wellbeing policy WRAP plans and stress risk assessment Staff networks embedded FTSU process embedded with over 100 Champions	2	Emma Ashley – Head of HR
	2D: Staff recommend the organisation as a place to work and receive treatment	from Staff Survey 2021 – 55% recommend place to work 73% recommend treatment	1	Emma Ashley – Head of HR
Domain 2: Workforce health and well-being overall rating			**Achieving (7)**	

Domain 3: Inclusive leadership

Domain	Outcome	Evidence	Rating	Owner (Dept/Lead)
	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	CNO lead for health inequalities and non-exec on national reference groups. Health inequalities and inclusion on the Terms of reference for Quality & Safety committee and People & Culture Committee. 'Journey of care' for patients accessing our services/ staff stories at each board meeting. Exec sponsors for each staff network. Celebrating Black History Month, LGBT+ History Month and working with HIVE community involvement. Social Value and Prevention pledge Strategic risk on BAF	2	Paula Simpson – Chief Nurse
	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 fully embedded. Every paper considered at board/committee meeting requires evidence of impact on inclusion. Strategic Risk on BAF	2	Paula Simpson – Chief Nurse

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	2	Paula Simpson – Chief Nurse
Domain 3: Inclusive leadership overall rating		**Achieving (6)**	

Third-party involvement in Domain 3 rating and review	
Trade Union Rep(s): Diane Moore - RCN	**Independent Evaluator(s)/Peer Reviewer(s):**

EDS Organisation Rating (overall rating): Achieving (22)
Organisation name(s):   Wirral Community Health & Care NHS Foundation Trust
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**
Neil Perris	2023/24
EDS Sponsor	**Authorisation date**
Paula Simpson	8/03/23

Domain	Outcome	Objective	Action	Completion date
1	1A: Patients (service users) have required levels of access to the service	Bladder & Bowel service to improve engagement with key stakeholder organizations representing underserved or vulnerable to ensure and inclusion needs are addressed Bladder & Bowel service to review our communications on public facing website.	Engage organisation who work with vulnerable groups to include Age concern, Tomorrow Women Wirral, Wirral Multicultural Organisation via the Inclusion & Partnership Forum Review and update website content	June 23 June 23
	1B: Individual patients (service users) health needs are met	Ensure the specific needs of homeless people are understood and addressed Ensure the specific needs of women exiting criminal justice system are understood and addressed	Engage with Homelessness liaison nurse (CWP) Engage with Tomorrows Women Wirral	June 23 June 23
	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	Objective	Action	Completion date
	2A: When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions	Improving health literacy amongst the workforce	Continue to promote campaigns in relation to the 5 health conditions targeted at the workforce Promote work life balance, healthy lifestyles and opportunity to exercise Support the use of Health & Wellbeing conversation ensuring all managers are equipped to support individualised needs amongst the workforce	March 24
	2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source			
	2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source			

	2D: Staff recommend the organisation as a place to work and receive treatment	70% staff recommend us as a place to work and recommend our care to family & friends	Increase our Exit interview uptake to be able to compare experiences of staff with protected characteristics	March 24

Domain	Outcome	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 inequalities	Board members routinely enable underserved voices to be heard	Develop & deliver a revised reciprocal mentoring scheme to engage senior leaders with staff members with protected characteristics	March 24
	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	ensure levers are in place to manage performance and monitor progress with staff and patients	Continue to develop the Inclusion dashboard and embed scrutiny at divisional SOG meetings	March 24

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