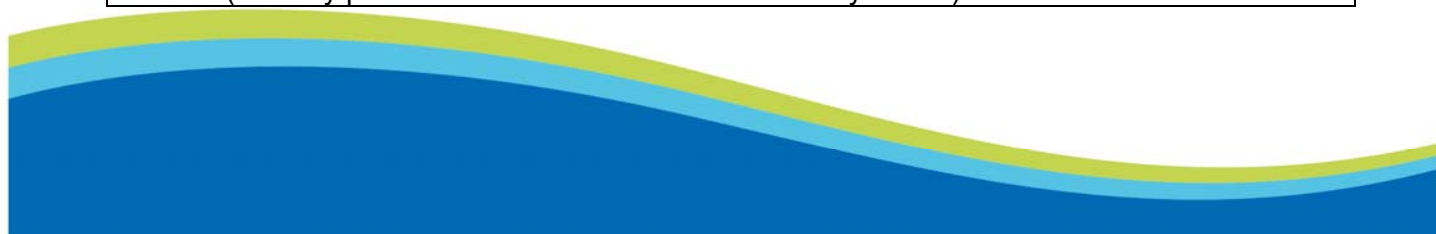


CQC Statement of Purpose – Annual Review and incorporation of newly commissioned services			
Meeting	Board of Directors		
Date	21/02/2024	Agenda Item	17
Lead Director	Paula Simpson, Chief Nurse		
Author(s)	Claire Wedge, Deputy Chief Nurse		
Action required (please select the appropriate box)			
To Approve <input checked="" type="checkbox"/>	To Discuss <input type="checkbox"/>	To Assure <input type="checkbox"/>	
Purpose			
<p>The purpose of this paper is to present an updated CQC statement of purpose to the Board of Directors for approval.</p> <p>The CQC statement of purpose is a legally required document that includes a standard set of information about a provider's service. The information contained within the document must always be accurate and up to date and is therefore subject to annual review.</p>			
Executive Summary			
<p>The Trust's CQC Statement of Purpose was last approved by the Board of Directors on 14 December 2022.</p> <p>The document has recently undergone an annual review which has been slightly extended to ensure responsiveness to incorporate the outcome of two newly commissioned services commencing from 01.04.24: Sexual Health Wirral and Lancashire 0-19 (up to 25 with SEND) Healthy Child Programme.</p> <p>This has resulted in the following amendments:</p> <ul style="list-style-type: none"> • Inclusion of Lancashire from 01.04.24 within the aims and objectives section to ensure comprehensive provision of all Trust services • Removal of reference to provision of integrated adult health and social care services from 01 June 2014 • Inclusion of provision of the 0-19 (up to 25 with SEND) Healthy Child Programme in Lancashire from 01 April 2024 incorporated within the St Catherine's Head Quarters registration, replicating the approach utilised for other regional services • Removal of 'family planning services' as a regulated activity at Arrowe Park Hospital (formally part of the Sexual Health Wirral delivery model) 			



The changes are highlighted in the updated statement of purpose in red text for ease of identification

Risks and opportunities:

None identified

Quality/inclusion considerations:

Quality & Equality Impact Assessment completed and attached No.

The quality impact assessments and equality impact assessments are undertaken through the work streams that underpin the service mobilisation projects.

Financial/resource implications:

None identified.

The Trust Vision – To be a population health focused organisation specialising in supporting people to live independent and healthy lives. The Trust Objectives are:

- Populations – We will support our populations to thrive by optimising wellbeing and independence
- People – We will support our people to create a place they are proud and excited to work
- Place - We will deliver sustainable health and care services within our communities enabling the creation of healthy places

Please select the top three Trust Strategic Objectives and underpinning goals that this report relates to, from the drop-down boxes below.

Populations - Safe care and support every time	People - Better employee experience to attract and retain talent	Place - Improve the health of our population and actively contribute to tackle health inequalities
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The Trust Social Value Intentions

Does this report align with the Trust social value intentions? Not applicable

If Yes, please select all of the social value themes that apply:

Community engagement and support

Purchasing and investing locally for social benefit

Representative workforce and access to quality work

Increasing wellbeing and health equity

Reducing environmental impact

Board of Directors is asked to consider the following action

To approve the updated CQC Statement of Purpose prior to submission to the Care Quality Commission.

Report history (Please include details of the last meeting that received this paper, including the title of the meeting, the date, and a summary of the outcome)

Submitted to	Date	Brief summary of outcome
Board of Directors	14/12/2022	Approved
Board of Directors	08/12/2021	Approved
Board of Directors	04/08/2021	Approved
Board of Directors	03/02/2021	Approved
Board of Directors	09/12/2020	Approved (virtual e-approval)



Statement of Purpose Health and Social Care Act 2008

Wirral Community Health and Care NHS Foundation Trust (RY7)

21 February 2024

The Statement of Purpose is a document which includes a standard required set of information defined by the Care Quality Commission, about the services the Trust provides.

This information includes;

- **Part 1: Provider's name, address and legal status.**
- **Part 2: Aims and objectives in providing the regulated activities and locations within the trust**
- **Part 3. Information per location (6):**
 - St Catherine's
 - Victoria Central Health Centre
 - Arrowe Park Hospital
 - Eastham clinic
 - Leasowe Primary care centre
 - Clatterbridge Hospital

The following pages outline the specific services the Trust provides, the locations of these services, the population they serve and which regulated service/s applies to them.

To ensure the accuracy of the document the Statement of Purpose it is reviewed annually or sooner if changes occur.

Statement of purpose, Part 1

Health and Social Care Act 2008, Regulation 12, schedule 3

The provider's business contact details, including address for service of notices and other documents, in accordance with Sections 93 and 94 of the Health and Social Care Act 2008

1. Provider's name and legal status

Full name ¹	Wirral Community Health and Care NHS Foundation Trust				
CQC provider ID	RY7				
Legal status ¹	Individual	<input type="checkbox"/>	Partnership	<input type="checkbox"/>	Organisation <input checked="" type="checkbox"/>

2. Provider's address, including for service of notices and other documents

Business address ²	St Catherine's Health Centre Church Road
Town/city	Birkenhead
County	Wirral
Post code	CH42 0LQ
Business telephone	0151 514 2160
Electronic mail (email) ³	paula.simpson8@nhs.net

By submitting this statement of purpose you are confirming your willingness for CQC to use the **email address** supplied at Section 2 above for service of documents and for sending all other correspondence to you. Email ensures fast and efficient delivery of important information. If you do not want to receive documents by email please check or tick the box below. We will not share this email address with anyone else.

I/we do NOT wish to receive notices and other documents from CQC by email	<input type="checkbox"/>
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¹ Where the provider is a partnership please fill in the partnership's name at 'Full name' in Section 1 above. Where the partnership does not have a name, please fill in the names of all the partners at Section 3 below

² Where you do not agree to service of notices and other documents by email they will be sent by post to the business address shown in Section 2. This includes draft and final inspection reports. This postal business address will be included on the CQC website.

³ Where you agree to service of notices and other documents by email your copies will be sent to the email address shown in Section 2. This includes draft and final inspection reports.

Statement of purpose, Part 2

Aims and objectives in providing the regulated activities and locations within the trust

Located in Wirral in North-West England, we provide high-quality primary, community and public health services to the population of Wirral and parts of Cheshire and Merseyside **and from 01 April 2024 Lancashire.**

~~On 1 June 2017 the trust formally began to provide integrated adult health and social care services for patients and service users in their local communities. This demonstrates the trusts' continued commitment to transforming public services responding to the needs of the communities we serve.~~

We play a key role in the local health and social care economy as a high performing organisation with an excellent clinical reputation. Our expert teams provide a diverse range of community health care services, seeing and treating people right through their lives both at home and close to home.

Our commitment to quality underpins our determination to achieve and demonstrate the sustainability, efficiency and effectiveness of our organisation. At the heart of this we will retain our focus on delivering and developing demonstrably safe, effective and high-quality services.

Our common purpose recognises the important role we play in delivering integrated care with partners in the local health economy.

Our common purpose is:

Together...we will support you and your community to live well

Our values will help us to achieve our vision:

Compassion: supportive and caring, listening to others

Open: communicating openly, honestly and sharing ideas

Trust: trusted to deliver, feeling valued and safe

Our services are local and community-based, provided from around 50 sites across Wirral, including our main clinical bases, St Catherine's Health Centre in Birkenhead and Victoria Central Health Centre in Wallasey.

We also provide integrated 0-19 services in Cheshire East comprising health visiting, school nursing, family nurse partnership and breastfeeding support services from 13 bases.

From 01 September 2021 the Trust has provided the 0-19 Healthy Child Programme (HCP) in St Helens. The HCP is the early intervention and prevention public health programme that lies at the heart of universal services for children, young people and families at a crucial stage of life.

The service is delivered in individual's homes and in community venues such as health centres, children's centres and schools. We work with our locality partners to co-deliver services, working closely with GPs, midwives, hospitals, early years services, schools, partner agencies and voluntary services. The service is delivered from four core bases included Haydock Medical Centre, Moss Bank Children's Centre, Billinge Health Centre and Station House Children's Centre.

In addition, from the 01 February 2022, the Trust has delivered the 0-25 Healthy Child Programme in Knowsley.

The Knowsley HCP consists of services for children and young people aged 0-25 and their families, and is delivered by a team of Health Visitors, School Nurses, Public Health Nurses, Nursery Nurses, an Infant feeding team and screeners who provide expert information, assessment and interventions.

The service also includes an Enhancing Families Service, who deliver a targeted programme of support to vulnerable parents-to-be and parents, as a targeted aspect of the HCP. There are also specialist roles, supporting Special Educational Needs and/or Disabilities (SEND), Mental Health, Early Help and Youth Offending.

The service is delivered in individuals' homes and in community venues such as health centres, children's centres and education settings.

The main service delivery base is North Huyton Primary Care Resource Centre.

From 01 April 2024 the Trust provides the 0-19 (up to 25 with SEND) Healthy Child Programme in Lancashire, which includes an Enhancing Families Service. The service is delivered in individuals' homes and community venues across East, Central and North Lancashire.

There are five main delivery bases across Lancashire, including Northbridge House in Burnley, Globe Centre in Accrington, Whitecross Business Park Lancaster, Edward VII building in Preston and Sterling Court in Leyland.

The service co-delivers services across a range of community sites such as Family Hubs and community assets and have some desk space in these sites on a drop-in basis.

The Trust are commissioned to provide inpatient beds for the purpose of rehabilitation and reablement; this service is delivered at the Clatterbridge Hospital site.

Strategic vision and objectives

The Trust vision is to be a population health focused organisation specialising in supporting people to live independent and healthy lives.

The Trust Objectives are:

- Populations – We will support our populations to thrive by optimising wellbeing and independence
- People – We will support our people to create a place they are proud and excited to work
- Place - We will deliver sustainable health and care services within our communities enabling the creation of healthy places

Statement of purpose, Part 3

Information per location

The information below is for location no.: 1 of a total of: 6 locations

Name of location	St Catherine's Health Centre
Address	Church Road Birkenhead Wirral Merseyside
Postcode	CH42 0LQ
Telephone	0151 514 2160
Email	paula.simpson8@nhs.net

Description of the location

(The premises and the area around them, access, adaptations, equipment, facilities, suitability for relevant special needs, staffing & qualifications etc)

St Catherine's Hospital is located in Birkenhead and provides services to all age groups.

It is specifically regulated for 'Treatment for disease, disorder or injury', which provides cover for all healthcare provision for the following community services:

- Community Nursing,
- Community Integrated Response Team including Home First, Urgent Community Response and Virtual Wards
- 0-19 services: Wirral, Cheshire East, St Helens and the 0-25 Healthy Child Programme in Knowsley, and from 01 April 2024 0-19 (up to 25 with SEND) in Lancashire
- Community Rehabilitation Services
- Community Cardiology Service
- Dental Service
- Community Eye Clinic and
- GP out of hours (GPOOH)

The site is also registered for 'Surgical procedures' which covers delivery of our dental service and minor eye surgical procedures provided by the Community Eye Clinic.

Registration for the site also covers 'Diagnostic and screening procedures' for our dental and community health services, including community nursing. The GPOOH service may also be provided from this site on a Saturday, Sunday and Bank Holidays, as part of the service business continuity plan.

'Transport services, triage and medical advice provided remotely' covers delivery of GPOOH.

In addition, the site is registered to deliver 'Family planning services' to cover our sexual health service delivery of inter-uterine coil devices (IUCD) fitting.

No of approved places / overnight beds (not NHS)

CQC service user bands

The people that will use this location ('The whole population' means everyone).

Adults aged 18-65	<input type="checkbox"/>	Adults aged 65+	<input type="checkbox"/>	
Mental health	<input type="checkbox"/>	Sensory impairment	<input type="checkbox"/>	
Physical disability	<input type="checkbox"/>	People detained under the Mental Health Act	<input type="checkbox"/>	
Dementia	<input type="checkbox"/>	People who misuse drugs or alcohol	<input type="checkbox"/>	
People with an eating disorder	<input type="checkbox"/>	Learning difficulties or autistic disorder	<input type="checkbox"/>	
Children aged 0 – 3 years	<input type="checkbox"/>	Children aged 4-12	<input type="checkbox"/>	Children aged 13-18 <input type="checkbox"/>
The whole population	<input checked="" type="checkbox"/>	Other (please specify below)	<input type="checkbox"/>	

The CQC service type(s) provided at this location	
Acute services (ACS)	<input type="checkbox"/>
Prison healthcare services (PHS)	<input type="checkbox"/>
Hospital services for people with mental health needs, learning disabilities, and problems with substance misuse (MLS)	<input type="checkbox"/>
Hospice services (HPS)	<input type="checkbox"/>
Rehabilitation services (RHS)	<input type="checkbox"/>
Long-term conditions services (LTC)	<input type="checkbox"/>
Residential substance misuse treatment and/or rehabilitation service (RSM)	<input type="checkbox"/>
Hyperbaric chamber (HBC)	<input type="checkbox"/>
Community healthcare service (CHC)	<input checked="" type="checkbox"/>
Community-based services for people with mental health needs (MHC)	<input type="checkbox"/>
Community-based services for people with a learning disability (LDC)	<input type="checkbox"/>
Community-based services for people who misuse substances (SMC)	<input type="checkbox"/>
Urgent care services (UCS)	<input checked="" type="checkbox"/>
Doctors consultation service (DCS)	<input checked="" type="checkbox"/>
Doctors treatment service (DTS)	<input checked="" type="checkbox"/>
Mobile doctor service (MBS)	<input type="checkbox"/>
Dental service (DEN)	<input checked="" type="checkbox"/>
Diagnostic and or screening service (DSS)	<input checked="" type="checkbox"/>
Care home service without nursing (CHS)	<input type="checkbox"/>
Care home service with nursing (CHN)	<input type="checkbox"/>
Specialist college service (SPC)	<input type="checkbox"/>
Domiciliary care service (DCC)	<input type="checkbox"/>
Supported living service (SLS)	<input type="checkbox"/>
Shared Lives (SHL)	<input type="checkbox"/>
Extra Care housing services (EXC)	<input type="checkbox"/>
Ambulance service (AMB)	<input type="checkbox"/>
Remote clinical advice service (RCA)	<input checked="" type="checkbox"/>
Blood and Transplant service (BTS)	<input type="checkbox"/>

Regulated activity(ies) carried on at this location		
Personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require nursing or personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require treatment for substance abuse	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation and nursing or personal care in the further education sector	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Treatment of disease, disorder or injury	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Assessment or medical treatment for persons detained under the Mental Health Act	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Surgical procedures	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Diagnostic and screening procedures	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Management of supply of blood and blood derived products etc	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Transport services, triage and medical advice provided remotely	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Maternity and midwifery services	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Termination of pregnancies	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Services in slimming clinics	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Nursing care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Family planning service	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		

The information below is for location no.:	2	of a total of:	6	locations
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Name of location	Victoria Central Health Centre
Address	Mill Lane Wallasey
Postcode	CH44 5UF
Telephone	0151 514 2160
Email	paula.simpson8@nhs.net

Description of the location	
(The premises and the area around them, access, adaptations, equipment, facilities, suitability for relevant special needs, staffing & qualifications etc)	
<p>Victoria Central Health Centre is located in Wallasey and provides services to all age groups.</p> <p>It is specifically regulated for 'Treatment for disease, disorder or injury, which provides cover for all healthcare professional and provision for a wide range of community services, including community nursing, 0-19 services and community rehabilitation services. Urgent care services including our walk-in centre and minor injuries unit and Doctor's consultation services including GP out of hours (GPOOH). Our dental service is also covered by this regulated activity.</p> <p>'Transport services, triage and medical advice provided remotely' covers delivery of GPOOH.</p> <p>The site is also registered for 'Surgical procedures' which covers delivery of our dental service.</p> <p>Registration for the site also covers 'Diagnostic and screening procedures' for our dental service, walk-in centre, GPOOH and community health services.</p> <p>In addition, the site is registered to deliver 'Family planning services' to cover our sexual health service delivery of inter-uterine coil devices (IUCD) fitting.</p>	
No of approved places / overnight beds (not NHS)	

CQC service user bands

The people that will use this location ('The whole population' means everyone).

Adults aged 18-65	<input type="checkbox"/>	Adults aged 65+	<input type="checkbox"/>	
Mental health	<input type="checkbox"/>	Sensory impairment	<input type="checkbox"/>	
Physical disability	<input type="checkbox"/>	People detained under the Mental Health Act	<input type="checkbox"/>	
Dementia	<input type="checkbox"/>	People who misuse drugs or alcohol	<input type="checkbox"/>	
People with an eating disorder	<input type="checkbox"/>	Learning difficulties or autistic disorder	<input type="checkbox"/>	
Children aged 0 – 3 years	<input type="checkbox"/>	Children aged 4-12	<input type="checkbox"/>	Children aged 13-18 <input type="checkbox"/>
The whole population	<input checked="" type="checkbox"/>	Other (please specify below)	<input type="checkbox"/>	

The CQC service type(s) provided at this location	
Acute services (ACS)	<input type="checkbox"/>
Prison healthcare services (PHS)	<input type="checkbox"/>
Hospital services for people with mental health needs, learning disabilities, and problems with substance misuse (MLS)	<input type="checkbox"/>
Hospice services (HPS)	<input type="checkbox"/>
Rehabilitation services (RHS)	<input type="checkbox"/>
Long-term conditions services (LTC)	<input type="checkbox"/>
Residential substance misuse treatment and/or rehabilitation service (RSM)	<input type="checkbox"/>
Hyperbaric chamber (HBC)	<input type="checkbox"/>
Community healthcare service (CHC)	<input checked="" type="checkbox"/>
Community-based services for people with mental health needs (MHC)	<input type="checkbox"/>
Community-based services for people with a learning disability (LDC)	<input type="checkbox"/>
Community-based services for people who misuse substances (SMC)	<input type="checkbox"/>
Urgent care services (UCS)	<input checked="" type="checkbox"/>
Doctors consultation service (DCS)	<input checked="" type="checkbox"/>
Doctors treatment service (DTS)	<input checked="" type="checkbox"/>
Mobile doctor service (MBS)	<input type="checkbox"/>
Dental service (DEN)	<input checked="" type="checkbox"/>
Diagnostic and or screening service (DSS)	<input checked="" type="checkbox"/>
Care home service without nursing (CHS)	<input type="checkbox"/>
Care home service with nursing (CHN)	<input type="checkbox"/>
Specialist college service (SPC)	<input type="checkbox"/>
Domiciliary care service (DCC)	<input type="checkbox"/>
Supported living service (SLS)	<input type="checkbox"/>
Shared Lives (SHL)	<input type="checkbox"/>
Extra Care housing services (EXC)	<input type="checkbox"/>
Ambulance service (AMB)	<input type="checkbox"/>
Remote clinical advice service (RCA)	<input checked="" type="checkbox"/>
Blood and Transplant service (BTS)	<input type="checkbox"/>

Regulated activity(ies) carried on at this location		
Personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require nursing or personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require treatment for substance abuse	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation and nursing or personal care in the further education sector	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Treatment of disease, disorder or injury	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Assessment or medical treatment for persons detained under the Mental Health Act	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Surgical procedures	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Diagnostic and screening procedures	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Management of supply of blood and blood derived products etc	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Transport services, triage and medical advice provided remotely	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Maternity and midwifery services	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Termination of pregnancies	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Services in slimming clinics	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Nursing care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Family planning service	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		

The information below is for location no.:	3	of a total of:	6	locations
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Name of location	Arrowe Park hospital
Address	Arrowe Park Road Upton Merseyside
Postcode	CH49 5PE
Telephone	0151 514 2160
Email	paula.simpson8@nhs.net

Description of the location	
(The premises and the area around them, access, adaptations, equipment, facilities, suitability for relevant special needs, staffing & qualifications etc)	
<p>Arrowe Park Hospital is located in Upton and provides services to all age groups.</p> <p>It is specifically regulated for 'Treatment for disease, disorder or injury, which provides cover for all healthcare professional and provision for a wide range of community services, including community nursing, 0-19 services and community rehabilitation services. Urgent care services including our urgent treatment centre (previously a walk-in centre) and Doctor's consultation services including GP out of hours (GPOOH). Our dental service is also covered by this regulated activity.</p> <p>'Transport services, triage and medical advice provided remotely' covers delivery of GPOOH.</p> <p>The site is also registered for 'Surgical procedures' which covers delivery of our dental service.</p> <p>Registration for the site also covers 'Diagnostic and screening procedures' for our dental, urgent treatment centre, GPOOH and community health services, including community nursing.</p> <p>In addition, the site is registered to deliver 'Family planning services' as part of our sexual health service delivery.</p>	
No of approved places / overnight beds (not NHS)	

CQC service user bands

The people that will use this location ('The whole population' means everyone).

Adults aged 18-65	<input type="checkbox"/>	Adults aged 65+	<input type="checkbox"/>	
Mental health	<input type="checkbox"/>	Sensory impairment	<input type="checkbox"/>	
Physical disability	<input type="checkbox"/>	People detained under the Mental Health Act	<input type="checkbox"/>	
Dementia	<input type="checkbox"/>	People who misuse drugs or alcohol	<input type="checkbox"/>	
People with an eating disorder	<input type="checkbox"/>	Learning difficulties or autistic disorder	<input type="checkbox"/>	
Children aged 0 – 3 years	<input type="checkbox"/>	Children aged 4-12	<input type="checkbox"/>	Children aged 13-18 <input type="checkbox"/>
The whole population	<input checked="" type="checkbox"/>	Other (please specify below)	<input type="checkbox"/>	

The CQC service type(s) provided at this location	
Acute services (ACS)	<input type="checkbox"/>
Prison healthcare services (PHS)	<input type="checkbox"/>
Hospital services for people with mental health needs, learning disabilities, and problems with substance misuse (MLS)	<input type="checkbox"/>
Hospice services (HPS)	<input type="checkbox"/>
Rehabilitation services (RHS)	<input type="checkbox"/>
Long-term conditions services (LTC)	<input type="checkbox"/>
Residential substance misuse treatment and/or rehabilitation service (RSM)	<input type="checkbox"/>
Hyperbaric chamber (HBC)	<input type="checkbox"/>
Community healthcare service (CHC)	<input type="checkbox"/>
Community-based services for people with mental health needs (MHC)	<input type="checkbox"/>
Community-based services for people with a learning disability (LDC)	<input type="checkbox"/>
Community-based services for people who misuse substances (SMC)	<input type="checkbox"/>
Urgent care services (UCS)	<input checked="" type="checkbox"/>
Doctors consultation service (DCS)	<input checked="" type="checkbox"/>
Doctors treatment service (DTS)	<input checked="" type="checkbox"/>
Mobile doctor service (MBS)	<input type="checkbox"/>
Dental service (DEN)	<input checked="" type="checkbox"/>
Diagnostic and or screening service (DSS)	<input checked="" type="checkbox"/>
Care home service without nursing (CHS)	<input type="checkbox"/>
Care home service with nursing (CHN)	<input type="checkbox"/>
Specialist college service (SPC)	<input type="checkbox"/>
Domiciliary care service (DCC)	<input type="checkbox"/>
Supported living service (SLS)	<input type="checkbox"/>
Shared Lives (SHL)	<input type="checkbox"/>
Extra Care housing services (EXC)	<input type="checkbox"/>
Ambulance service (AMB)	<input type="checkbox"/>
Remote clinical advice service (RCA)	<input checked="" type="checkbox"/>
Blood and Transplant service (BTS)	<input type="checkbox"/>

Regulated activity(ies) carried on at this location		
Personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require nursing or personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require treatment for substance abuse	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation and nursing or personal care in the further education sector	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Treatment of disease, disorder or injury	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Assessment or medical treatment for persons detained under the Mental Health Act	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Surgical procedures	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Diagnostic and screening procedures	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Management of supply of blood and blood derived products etc	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Transport services, triage and medical advice provided remotely	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Maternity and midwifery services	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Termination of pregnancies	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Services in slimming clinics	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Nursing care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Family planning service	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		

The information below is for location no.:	4	of a total of:	6	locations
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Name of location	Eastham Clinic
Address	31 Eastham Rake Eastham
Postcode	CH62 9AN
Telephone	0151 514 2160
Email	paula.simpson8@nhs.net

Description of the location	
(The premises and the area around them, access, adaptations, equipment, facilities, suitability for relevant special needs, staffing & qualifications etc)	
<p>Eastham Clinic is located in South Wirral and provides services to all age groups.</p> <p>It is specifically regulated for 'Treatment for disease, disorder or injury, which provides cover for all healthcare professional and provision for a wide range of community services, including community nursing, 0-19 services and community rehabilitation services. Urgent care services including our walk-in centre.</p> <p>Registration for the site also covers 'Diagnostic and screening procedures' for our walk-in centre and community health services, including community nursing.</p>	
No of approved places / overnight beds (not NHS)	

CQC service user bands

The people that will use this location ('The whole population' means everyone).

Adults aged 18-65	<input type="checkbox"/>	Adults aged 65+	<input type="checkbox"/>	
Mental health	<input type="checkbox"/>	Sensory impairment	<input type="checkbox"/>	
Physical disability	<input type="checkbox"/>	People detained under the Mental Health Act	<input type="checkbox"/>	
Dementia	<input type="checkbox"/>	People who misuse drugs or alcohol	<input type="checkbox"/>	
People with an eating disorder	<input type="checkbox"/>	Learning difficulties or autistic disorder	<input type="checkbox"/>	
Children aged 0 – 3 years	<input type="checkbox"/>	Children aged 4-12	<input type="checkbox"/>	Children aged 13-18 <input type="checkbox"/>
The whole population	<input checked="" type="checkbox"/>	Other (please specify below)	<input type="checkbox"/>	

The CQC service type(s) provided at this location	
Acute services (ACS)	<input type="checkbox"/>
Prison healthcare services (PHS)	<input type="checkbox"/>
Hospital services for people with mental health needs, learning disabilities, and problems with substance misuse (MLS)	<input type="checkbox"/>
Hospice services (HPS)	<input type="checkbox"/>
Rehabilitation services (RHS)	<input type="checkbox"/>
Long-term conditions services (LTC)	<input type="checkbox"/>
Residential substance misuse treatment and/or rehabilitation service (RSM)	<input type="checkbox"/>
Hyperbaric chamber (HBC)	<input type="checkbox"/>
Community healthcare service (CHC)	<input checked="" type="checkbox"/>
Community-based services for people with mental health needs (MHC)	<input type="checkbox"/>
Community-based services for people with a learning disability (LDC)	<input type="checkbox"/>
Community-based services for people who misuse substances (SMC)	<input type="checkbox"/>
Urgent care services (UCS)	<input checked="" type="checkbox"/>
Doctors consultation service (DCS)	<input type="checkbox"/>
Doctors treatment service (DTS)	<input type="checkbox"/>
Mobile doctor service (MBS)	<input type="checkbox"/>
Dental service (DEN)	<input type="checkbox"/>
Diagnostic and or screening service (DSS)	<input checked="" type="checkbox"/>
Care home service without nursing (CHS)	<input type="checkbox"/>
Care home service with nursing (CHN)	<input type="checkbox"/>
Specialist college service (SPC)	<input type="checkbox"/>
Domiciliary care service (DCC)	<input type="checkbox"/>
Supported living service (SLS)	<input type="checkbox"/>
Shared Lives (SHL)	<input type="checkbox"/>
Extra Care housing services (EXC)	<input type="checkbox"/>
Ambulance service (AMB)	<input type="checkbox"/>
Remote clinical advice service (RCA)	<input type="checkbox"/>
Blood and Transplant service (BTS)	<input type="checkbox"/>

Regulated activity(ies) carried on at this location		
Personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require nursing or personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require treatment for substance abuse	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation and nursing or personal care in the further education sector	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Treatment of disease, disorder or injury	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Assessment or medical treatment for persons detained under the Mental Health Act	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Surgical procedures	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Diagnostic and screening procedures	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Management of supply of blood and blood derived products etc	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Transport services, triage and medical advice provided remotely	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Maternity and midwifery services	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Termination of pregnancies	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Services in slimming clinics	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Nursing care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Family planning service	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		

The information below is for location no.:	5	of a total of:	6	locations
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Name of location	Leasowe Primary Care Centre
Address	2 Hudson Road Wirral
Postcode	CH46 2QQ
Telephone	0151 514 2160
Email	paula.simpson8@nhs.net

Description of the location (The premises and the area around them, access, adaptations, equipment, facilities, suitability for relevant special needs, staffing & qualifications etc)	
<p>Leasowe primary care centre is located in north Wirral.</p> <p>It is specifically regulated for 'Treatment for disease, disorder or injury, which provides cover for our dental service.</p> <p>The site is also registered for 'Surgical procedures' which covers delivery of our dental service.</p> <p>Registration for the site also covers 'Diagnostic and screening procedures' for our dental service.</p>	
No of approved places / overnight beds (not NHS)	

CQC service user bands

The people that will use this location ('The whole population' means everyone).

Adults aged 18-65	<input type="checkbox"/>	Adults aged 65+	<input type="checkbox"/>	
Mental health	<input type="checkbox"/>	Sensory impairment	<input type="checkbox"/>	
Physical disability	<input type="checkbox"/>	People detained under the Mental Health Act	<input type="checkbox"/>	
Dementia	<input type="checkbox"/>	People who misuse drugs or alcohol	<input type="checkbox"/>	
People with an eating disorder	<input type="checkbox"/>	Learning difficulties or autistic disorder	<input type="checkbox"/>	
Children aged 0 – 3 years	<input type="checkbox"/>	Children aged 4-12	<input type="checkbox"/>	Children aged 13-18 <input type="checkbox"/>
The whole population	<input checked="" type="checkbox"/>	Other (please specify below)	<input type="checkbox"/>	

The CQC service type(s) provided at this location	
Acute services (ACS)	<input type="checkbox"/>
Prison healthcare services (PHS)	<input type="checkbox"/>
Hospital services for people with mental health needs, learning disabilities, and problems with substance misuse (MLS)	<input type="checkbox"/>
Hospice services (HPS)	<input type="checkbox"/>
Rehabilitation services (RHS)	<input type="checkbox"/>
Long-term conditions services (LTC)	<input type="checkbox"/>
Residential substance misuse treatment and/or rehabilitation service (RSM)	<input type="checkbox"/>
Hyperbaric chamber (HBC)	<input type="checkbox"/>
Community healthcare service (CHC)	<input type="checkbox"/>
Community-based services for people with mental health needs (MHC)	<input type="checkbox"/>
Community-based services for people with a learning disability (LDC)	<input type="checkbox"/>
Community-based services for people who misuse substances (SMC)	<input type="checkbox"/>
Urgent care services (UCS)	<input type="checkbox"/>
Doctors consultation service (DCS)	<input type="checkbox"/>
Doctors treatment service (DTS)	<input type="checkbox"/>
Mobile doctor service (MBS)	<input type="checkbox"/>
Dental service (DEN)	<input checked="" type="checkbox"/>
Diagnostic and or screening service (DSS)	<input checked="" type="checkbox"/>
Care home service without nursing (CHS)	<input type="checkbox"/>
Care home service with nursing (CHN)	<input type="checkbox"/>
Specialist college service (SPC)	<input type="checkbox"/>
Domiciliary care service (DCC)	<input type="checkbox"/>
Supported living service (SLS)	<input type="checkbox"/>
Shared Lives (SHL)	<input type="checkbox"/>
Extra Care housing services (EXC)	<input type="checkbox"/>
Ambulance service (AMB)	<input type="checkbox"/>
Remote clinical advice service (RCA)	<input type="checkbox"/>
Blood and Transplant service (BTS)	<input type="checkbox"/>

Regulated activity(ies) carried on at this location		
Personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require nursing or personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require treatment for substance abuse	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation and nursing or personal care in the further education sector	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Treatment of disease, disorder or injury	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Assessment or medical treatment for persons detained under the Mental Health Act	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Surgical procedures	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Diagnostic and screening procedures	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Management of supply of blood and blood derived products etc	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Transport services, triage and medical advice provided remotely	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Maternity and midwifery services	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Termination of pregnancies	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Services in slimming clinics	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Nursing care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Family planning service	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		

The information below is for location no.:	6	of a total of:	6	locations
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Name of location	Clatterbridge Hospital
Address	Clatterbridge Road, Wirral
Postcode	CH63 4JY
Telephone	0151 514 2160
Email	paula.simpson8@nhs.net

Description of the location	
(The premises and the area around them, access, adaptations, equipment, facilities, suitability for relevant special needs, staffing & qualifications etc)	
Clatterbridge Hospital is located in mid Wirral.	
It is specifically regulated for 'Treatment for disease, disorder or injury' and 'Diagnostic and screening procedures', to provide a Community Intermediate Care Centre (CICC) across three wards accommodating up to 73 people.	
The CICC will be primarily be used to support frail and older people with rehabilitation needs that cannot be managed within their own home environment.	
No of approved places / overnight beds (not NHS)	

CQC service user bands

The people that will use this location ('The whole population' means everyone).

Adults aged 18-65	<input checked="" type="checkbox"/>	Adults aged 65+	<input checked="" type="checkbox"/>		
Mental health	<input type="checkbox"/>	Sensory impairment	<input type="checkbox"/>		
Physical disability	<input type="checkbox"/>	People detained under the Mental Health Act	<input type="checkbox"/>		
Dementia	<input type="checkbox"/>	People who misuse drugs or alcohol	<input type="checkbox"/>		
People with an eating disorder	<input type="checkbox"/>	Learning difficulties or autistic disorder	<input type="checkbox"/>		
Children aged 0 – 3 years	<input type="checkbox"/>	Children aged 4-12	<input type="checkbox"/>	Children aged 13-18	<input type="checkbox"/>
The whole population	<input type="checkbox"/>	Other (please specify below)		<input type="checkbox"/>	

The CQC service type(s) provided at this location	
Acute services (ACS)	<input type="checkbox"/>
Prison healthcare services (PHS)	<input type="checkbox"/>
Hospital services for people with mental health needs, learning disabilities, and problems with substance misuse (MLS)	<input type="checkbox"/>
Hospice services (HPS)	<input type="checkbox"/>
Rehabilitation services (RHS)	<input checked="" type="checkbox"/>
Long-term conditions services (LTC)	<input type="checkbox"/>
Residential substance misuse treatment and/or rehabilitation service (RSM)	<input type="checkbox"/>
Hyperbaric chamber (HBC)	<input type="checkbox"/>
Community healthcare service (CHC)	<input type="checkbox"/>
Community-based services for people with mental health needs (MHC)	<input type="checkbox"/>
Community-based services for people with a learning disability (LDC)	<input type="checkbox"/>
Community-based services for people who misuse substances (SMC)	<input type="checkbox"/>
Urgent care services (UCS)	<input type="checkbox"/>
Doctors consultation service (DCS)	<input type="checkbox"/>
Doctors treatment service (DTS)	<input type="checkbox"/>
Mobile doctor service (MBS)	<input type="checkbox"/>
Dental service (DEN)	<input type="checkbox"/>
Diagnostic and or screening service (DSS)	<input checked="" type="checkbox"/>
Care home service without nursing (CHS)	<input type="checkbox"/>
Care home service with nursing (CHN)	<input type="checkbox"/>
Specialist college service (SPC)	<input type="checkbox"/>
Domiciliary care service (DCC)	<input type="checkbox"/>
Supported living service (SLS)	<input type="checkbox"/>
Shared Lives (SHL)	<input type="checkbox"/>
Extra Care housing services (EXC)	<input type="checkbox"/>
Ambulance service (AMB)	<input type="checkbox"/>
Remote clinical advice service (RCA)	<input type="checkbox"/>
Blood and Transplant service (BTS)	<input type="checkbox"/>

Regulated activity(ies) carried on at this location		
Personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require nursing or personal care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation for persons who require treatment for substance abuse	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Accommodation and nursing or personal care in the further education sector	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Treatment of disease, disorder or injury	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Assessment or medical treatment for persons detained under the Mental Health Act	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Surgical procedures	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Diagnostic and screening procedures	<input checked="" type="checkbox"/>	
Registered Manager(s) for this regulated activity: Paula Simpson		
Management of supply of blood and blood derived products etc	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Transport services, triage and medical advice provided remotely	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Maternity and midwifery services	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Termination of pregnancies	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Services in slimming clinics	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Nursing care	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		
Family planning service	<input type="checkbox"/>	
Registered Manager(s) for this regulated activity:		

Statement of purpose, Part 4

Registered manager details

Including address for service of notices and other documents

The information below is for manager number:		of a total of:		Managers working for the provider shown in part 1
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1. Manager's full name	Mrs Paula Simpson
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2. Manager's contact details	
Business address	St Catherine's Health Centre
Town/city	Church Road
County	Birkenhead
Post code	Wirral
Business telephone	CH42 0LQ
Manager's email address¹	
paula.simpson8@nhs.net	

¹ Where the manager has agreed to service of notices and other documents by email they will be sent to this email address. This includes draft and final inspection reports on all locations where they manage regulated activities.

Where the manager does not agree to service of notices and other documents by email they will be sent by post to the provider postal business address shown in Part 1 of the statement of purpose. This includes draft and final inspection reports on all locations.

Please note: CQC can deem notices sent to manager(s) at the relevant email or postal address for service in this statement of purpose as having been served, as described in Sections 93 and 94 of the Health and Social Care Act 2008. The address supplied must therefore be accurate, up to date, and able to ensure prompt delivery of these important documents to registered managers.

3. Locations managed by the registered manager at 1 above	
(Please see part 3 of this statement of purpose for full details of the location(s))	
Name(s) of location(s) (list)	Percentage of time spent at this location

4. Regulated activity(ies) managed by this manager		
Personal care	<input type="checkbox"/>	
Accommodation for persons who require nursing or personal care	<input type="checkbox"/>	
Accommodation for persons who require treatment for substance abuse	<input type="checkbox"/>	
Accommodation and nursing or personal care in the further education sector	<input type="checkbox"/>	
Treatment of disease, disorder or injury	<input checked="" type="checkbox"/>	
Assessment or medical treatment for persons detained under the Mental Health Act	<input type="checkbox"/>	
Surgical procedures	<input checked="" type="checkbox"/>	
Diagnostic and screening procedures	<input checked="" type="checkbox"/>	
Management of supply of blood and blood derived products etc	<input type="checkbox"/>	
Transport services, triage and medical advice provided remotely	<input checked="" type="checkbox"/>	
Maternity and midwifery services	<input type="checkbox"/>	
Termination of pregnancies	<input type="checkbox"/>	
Services in slimming clinics	<input type="checkbox"/>	
Nursing care	<input type="checkbox"/>	
Family planning service	<input checked="" type="checkbox"/>	

5. Locations, regulated activities and job shares

Where this manager does not manage all of the regulated activities ticked / checked at 4 above at all of the locations listed at 3 above, please describe which regulated activities they manage at which locations below.

Please also describe below any job share arrangements that include or affect this manager.

N/A

Equality Delivery System Assurance Report

Meeting	Board of Directors		
Date	21/02/2024	Agenda Item	18
Lead Director	Claus Madsen, Chief People Officer		
Author(s)	Neil Perris, Head of Equality, Diversity and Inclusion and Emma Ashley, Head of HR (E&W)		
Action required (please select the appropriate box)			
To Approve <input checked="" type="checkbox"/>	To Discuss <input type="checkbox"/>	To Assure <input checked="" type="checkbox"/>	
Purpose			
<p>This report provides the Public Board of Directors with assurance of the process undertaken and identified actions in completing the national contractual requirements of the Equality Delivery System 2023. The People and Culture Committee received the report on 14 February and were assured by the update provided. People and Culture Committee agreed for the report to be submitted to Public Board for approval.</p>			
Executive Summary			
<p>The Equality Delivery System (EDS) is a system that helps NHS organisations improve the services they provide for their local communities and provide better working environments, free of discrimination, for those who work in the NHS, while meeting the requirements of the Equality Act 2010. The EDS was developed by the NHS, for the NHS, taking inspiration from existing work and good practice. We have used the National Reporting template.</p> <p>Three areas of the EDS</p> <ul style="list-style-type: none"> Domain 1 services Domain 2 workforce Domain 3 inclusive leadership <p>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</p>			



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. The process is through self-assessment and then moderation by stakeholders.

Progress made on last year's identified actions include;

- Increased engagement with stakeholders from marginalised groups (Cardiology with Tomorrow's Women Wirral)
- To ensure the specific needs of homeless people are understood and addressed (Bladder and Bowel service)
- Increased awareness raising for health conditions and activities relating to NHS games
- Ongoing work regarding the Prevention Pledge implementation
- Increased completion rates of exit interviews
- Enhanced inclusion data in TIG and monitored at monthly SAFE OPG meetings.

2023 EDS

Domain 1 – Services we had three services submit evidence for review at a stakeholder event which included local community engagement groups and service users on the 17.01.24. The three services listed below were

- Adults Learning Disability Speech and Language Therapy
- Sexual Health
- 0-19 Neurodevelopment Team

For Domain 2 – Workforce Wellbeing we reviewed evidence at an event on the 31.01.24 with representatives from staff networks, wellbeing champions and JUSS.

For Domain 3 – Inclusive Leadership we reviewed evidence virtually with JUSS and staff network representatives. This was also reviewed with the Head of Inclusion from Bridgewater Community NHS Trust as our buddy organisation though the Cheshire and Merseyside ICB.

Actions for all of the domains and outcomes are in separate action plan and to meet national requirements this must be Board approved and published by the end of February.



<p>Risks and opportunities:</p> <p>N/A</p>					
<p>Quality/inclusion considerations:</p> <p>Quality & Equality Impact Assessment completed and attached No.</p> <p>It is not applicable as the EDS report uses a national template which has been assessed at NHS England level regarding EQIA considerations.</p>					
<p>Financial/resource implications:</p> <p>No</p>					
<p>The Trust Vision – To be a population health focused organisation specialising in supporting people to live independent and healthy lives. The Trust Objectives are:</p> <ul style="list-style-type: none"> • Populations – We will support our populations to thrive by optimising wellbeing and independence • People – We will support our people to create a place they are proud and excited to work • Place - We will deliver sustainable health and care services within our communities enabling the creation of healthy places <p>Please select the top three Trust Strategic Objectives and underpinning goals that this report relates to, from the drop-down boxes below.</p> <table border="1"> <tr> <td>People - Improve the wellbeing of our employees</td> <td>People - Better employee experience to attract and retain talent</td> <td>Place - Improve the health of our population and actively contribute to tackle health inequalities</td> </tr> </table>			People - Improve the wellbeing of our employees	People - Better employee experience to attract and retain talent	Place - Improve the health of our population and actively contribute to tackle health inequalities
People - Improve the wellbeing of our employees	People - Better employee experience to attract and retain talent	Place - Improve the health of our population and actively contribute to tackle health inequalities			
<p>The Trust Social Value Intentions</p> <p>Does this report align with the Trust social value intentions? Yes.</p> <p>If Yes, please select all of the social value themes that apply:</p> <p>Community engagement and support <input checked="" type="checkbox"/></p> <p>Purchasing and investing locally for social benefit <input type="checkbox"/></p> <p>Representative workforce and access to quality work <input checked="" type="checkbox"/></p> <p>Increasing wellbeing and health equity <input checked="" type="checkbox"/></p> <p>Reducing environmental impact <input type="checkbox"/></p>					
<p>People & Culture Committee is asked to consider the following action</p>					



Public Board is asked to review the EDS report and recommend approval to meet the national contractual requirements.

Report history (Please include details of the last meeting that received this paper, including the title of the meeting, the date, and a summary of the outcome)

Submitted to	Date	Brief summary of outcome
People and Culture Committee	14/02/2024	PCC were assured with the update provided and agreed that the report should be taken to Board for approval.



Classification: Official

Publication approval reference: PAR1262



NHS Equality Delivery System 2022 EDS Reporting Template

Version 1, 5 February 2024

Contents

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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/

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 – Chief Nurse Claus Madsen – Chief People Officer		
Name of Integrated Care System	Cheshire & Merseyside ICB			

EDS Lead	Neil Perris – Head of Equity, Diversity & Inclusion Emma Ashley – Head of HR (Staff Wellbeing & Engagement)	At what level has this been completed?		
			*List organisations	
EDS engagement date(s)	17 Jan 2024 – Domain 1 31 Jan 2024 – Domain 2 5 Feb 2024 – Domain 3	Individual organisation	Wirral Community Health & Care NHS Foundation Trust, Peer reviewed by: Bridgewater Community Healthcare NHS Foundation Trust (Domain 3)	
		Partnership* (two or more organisations)		
		Integrated Care System-wide*		

Date completed	February 2024	Month and year published	Feb 2024
Date authorised		Revision date	

Completed actions from previous year	
Action/activity	Related equality objectives
<ul style="list-style-type: none"> • Bladder & Bowel service have engaged with stakeholder groups including, Age concern, Tomorrow's Women Wirral, Wirral Multicultural Organisation via the Inclusion & Partnership Forum and by direct contact. • Bladder & Bowel service to review service information on public website. • Ensure the specific needs of homeless people are understood and addressed in the bladder & bowel service by engagement with Homeless Liaison Nurse in CWP • Ensure the specific needs of women exiting criminal justice system are understood and addressed in Bladder & Bowel Service and Community Cardiology and Cardia Rehab 	Engagement with key stakeholder organisations representing underserved or vulnerable to ensure and inclusion needs are addressed.
<ul style="list-style-type: none"> • Increased awareness raising for health conditions and activities relating to NHS games • Ongoing work regarding the Prevention Pledge implementation 	When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions and opportunities to improve their physical & mental wellbeing
<ul style="list-style-type: none"> • Increased completion rates of exit interviews 	Support our understanding of staff experience by increasing the numbers of exit interviews completed and being able

	to compare the experiences of people with different protected characteristics
<ul style="list-style-type: none">Enhanced inclusion data in TIG and monitored at monthly SAFE OPG meetings	Continue to develop the Inclusion dashboard and embed scrutiny at divisional SAFE OPG meetings

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	Overall moderated rating	Owner (Dept/Lead)
<i>Domain 1: Commissioned or provided service</i>	1A: Patients (service users) have required levels of access to the service	<p>Services provided data and evidence to show relevant patients with higher risks due to a protected characteristic or at risk of health inequalities have adequate access to the service.</p> <p>Patients consistently report very good or excellent (above 92% for all services) when asked about accessing services. The services and the trust as an organisation have knowledge of barriers and have changed outcomes for people who experience those barriers in accessing services and are actively working to identify and tackle further inequalities in their (and others) provision.</p> <p>The grading for Adult LD SLT was moderated from a service suggested score of Excelling to a moderated score of Achieving however participants were keen to acknowledge the excellent work that had been undertaken already by the service.</p> <p>The grading for Sexual Health and for 0-19 Neurodevelopmental remained at the service suggested gradings of Excelling. This resulted therefore in an overall Excelling grading for this outcome.</p> <p>Adult LD SLT There was some challenge to Adult LD SLT due to reported waiting list and concerns on staffing</p>	3 Excelling	<p>Adult Learning Disability Speech & Language Therapy, Andrea Cameron-Collier 0-19</p> <p>Sexual Health Wirral, Millie Williams/Sally Barlow</p> <p>Neurodevelopmental Team, Lindsey Costello/Rebecca Banks/ Nicky Birkby.</p>

		<p>resource, however the service reported this will be mitigated by new member of staff starting in post recently. Participants accepted this mitigation at service level but were keen to point out that there are concerns around resourcing of LD services across the system.</p> <p>The service identified and reported a need to further develop the Accessibility & Inclusion Template on the EPR to allow options for 'no comprehension of concept' for things like gender identity, faith/religion, sexual orientation as these were likely to be beyond the comprehension abilities of many of the clients in the Adult LD SLT service. ACTION: Work with Inclusion team to further develop the Accessibility & Inclusion Template to include options for 'no comprehension'.</p> <p>The Adult LD SLT service also highlighted that they felt their current patient feedback form didn't meet the needs of the service users. Support was offered from the Inclusion Team and LD day centres (Wirral Evolutions) and Healthwatch to support this work. ACTION: Work with others including patients and carers and other stakeholders to develop a more accessible feedback form that would meet the needs of the patients and their carers</p>		
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		<p>Sexual Health Service The service was challenged to evidence how it supported people with learning disabilities as some of the stakeholders felt this evidence was absent from the presentation. The service apologies for the absence of content in the presentation around this and spoke about its Link team who can be contacted directly by those professionals caring for people with LD. A wide range of reasonable adjustments are offered by the service to support access and improved outcomes for patients with LD or ADHD/Autism. It was recognised that service awareness between Wirral Evolution and Sexual Health were limited, and this needed some attention. ACTION: Sexual Health Wirral to make contact with Wirral Evolutions to improve awareness and explore further work to develop the service offer.</p> <p>Wirral 0-19 Neurodevelopmental Team The 0-19 Neurodevelopmental Team identified that they wanted to further engage with communities from BAME backgrounds to ensure service awareness and they have recorded an action. ACTION: to work with Wirral Multicultural Organisation in Feb '24</p>		
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	<p>1B: Individual patients (service users) health needs are met</p>	<p>Patients at higher risk due to protected characteristic needs are met in a way that works for them across all three services. The service often consults with patients and stakeholders to design, increase & decrease service elements within existing resources, and improve services provided. The services signpost to VSCE organisations and social prescribing appropriately. Personalised care is embedded into the care delivered for those with higher risks due to a protected characteristic by the services and are supported to do so by the organisation.</p> <p>Adult LD SLT service was graded at Excelling as a recommended grading, but this was moderated to Achieving. Both Sexual Health and 0-19 neurodevelopmental Team were graded as Excelling for this outcome. This resulted therefore in an overall Excelling grading for this outcome.</p> <p>Adult LD SLT Strong evidence was provided around the personalisation of care based on individual need. Due to the issues identified around accurately recording protected characteristics on the current Accessibility & Inclusion Template and due to the resourcing pressure described, the grading was moderated to achieving. The service also reported a lack of an accessible feedback form that was appropriate for their clients and were offered support in developing this from Healthwatch and Wirral Evolutions.</p>	<p>3 Excelling</p>	<p>Adult Learning Disability Speech & Language Therapy, Andrea Cameron-Collier 0-19</p> <p>Sexual Health Wirral, Millie Williams/Sally Barlow</p> <p>Neurodevelopmental Team, Lindsey Costello/Rebecca Banks/ Nicky Birkby.</p>
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		<p>ACTION: Service to work with Inclusion lead, Wirral Evolutions & Healthwatch to develop appropriate feedback form.</p> <p>Sexual Health Service The service presented evidence to show that personalisation of care is an important feature of the service and the service goes to some lengths to understand the needs of vulnerable groups and individuals. The service discussed how outreach service from the service and its key stakeholders are reaching some of the most vulnerable and those at risk of inequalities. The service also talked about the link team which is able to make a broad range of reasonable adjustments to accommodate the needs of individuals including those with disabilities, long term conditions and support those who are neurodiverse.</p> <p>0-19 Neurodevelopmental Team The service has undertaken and evidenced lots of work to personalise care to individual needs across the protected characteristics and other vulnerabilities. The team has undertaken work with system partners to improve patient pathways supporting a reduction in waiting times from (107 weeks in 2020 to 47 weeks in 2023) despite large increased in referral rates.</p>		
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	<p>1C: When patients (service users) use the service, they are free from harm</p>	<p>The organisation has procedures/initiatives in place to enhance safety in services for patients in all protected characteristic groups where there are any known H&S risks. Staff and patients feel confident, and are supported to, report incidents and near misses. The organisation encourages an improvement culture giving consideration to equality and health inequality themes in safety incidents and near misses. Staff know how to and feel psychologically safe to raise concerns and our Freedom to Speak up Guardian is seen as trusted, approachable, and accessible and well supported by the numerous FTSU Champions across the organisation. This high performance in this area was recognised in the Trust recent CQC inspection.</p> <p>All three services rated themselves as Achieving</p>	<p>2 Achieving</p>	<p>Adult Learning Disability Speech & Language Therapy, Andrea Cameron-Collier 0-19</p> <p>Sexual Health Wirral, Millie Williams/Sally Barlow</p> <p>Neurodevelopmental Team, Lindsey Costello/Rebecca Banks/ Nicky Birkby.</p>
	<p>1D: Patients (service users) report positive experiences of the service</p>	<p>The services collate data from patients with protected characteristics about their experience of the service. The organisations create evidence-based action plans in collaboration with patients and relevant stakeholders, and monitors progress. The Quality Improvement approach across the organisation is well embedded. The organisation shows understanding of the link between staff and patient treatment and demonstrates improvement in patient experiences. Sexual Health and the 0-19 Neurodevelopmental team were able to show a range of positive and helpful feedback and demonstrate how this had been used to improve service provision. Both</p>	<p>2 Achieving</p>	<p>Adult Learning Disability Speech & Language Therapy, Andrea Cameron-Collier 0-19</p> <p>Sexual Health Wirral, Millie Williams/Sally Barlow</p> <p>Neurodevelopmental Team, Lindsey Costello/Rebecca Banks/ Nicky Birkby.</p>

		<p>services rated themselves as Achieving and this was agreed during moderation. Whilst service improvements were also very apparent in the Adult LD SLT service, they acknowledged that the amount of formal feedback received from patients and carers was limited due to the absence of an appropriate form for patients to use. The service score of this service was therefore moderated down to Developing.</p> <p>The overall score for this outcome was Achieving</p>		
Domain 1: Commissioned or provided services overall rating			10	

Domain 2: Workforce health and well-being

<p style="text-align: center;">Domain 2: Workforce health and well-being</p>	<p>2A: When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions</p>	<p>Reasonable adjustment procedure for staff with disabilities/long term conditions and Supporting Mental Wellbeing policy. Also introduced Menopause policy, Staff Network and awareness sessions.</p> <p>Continue to deliver wellbeing conversation training for all staff based on NHS England’s health and wellbeing framework which enables self-reflection and supporting others as individuals.</p> <p>Dedicated wellbeing Hub on Staffzone with access to mental and financial wellbeing support including an enhanced offer of staff benefits via VivUp.</p> <p>Mindfulness session held with Poppy Factory on-line.</p> <p>Made a commitment to the Charter for Employers who are Positive About Mental Health via Mindful Employer.</p> <p>Employee Assistance programme in place and recently re - tendered with an enhanced service Have a standing item on the Trust update twice a week relating to wellbeing promotions/opportunities/initiatives. Promoted physical activity through NHS games. Colleagues participated in a range of events including the family orienteering, golf, and running.</p> <p>Signposts to national support including promotion of Access to Work, C&M Resilience Hub, Debt advice, Mindful Employers and support also available</p>	<p style="text-align: center;">2 Achieving</p>	<p>Emma Ashley</p>
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		<p>through FTSU up guardians/champions, HR, JUSS (staff side), professional nurse advocates, practice education facilitators.</p> <p>As part of the Prevention Pledge covers some of the health conditions listed.</p> <p>Feedback – stakeholder event agreed with rating.</p> <p>Action identified – to continue to promote wellbeing initiatives for these health conditions</p>		
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	<p>2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source</p>	<p>For 2022 staff survey results (WRES) BME staff are more likely to state that they feel they have been harassed, bullied or abused by patients, relatives or the public and/or other staff. The percentage of BME staff reporting this has doubled from the previous year from 16.2% to 35.3%.</p> <p>BME staff stated they are more likely than white staff to have experienced discrimination from a manager/team leader or other colleagues, although the percentage has reduced slightly from the previous year and mirrors the national results. For 2022 staff survey results (WDES).</p> <p>With regards to staff experiencing harassment, bullying or abuse from managers, although this continues to be higher than that reported by non-disabled staff, the Trust has seen a reduction for disabled staff experiencing this. It is the lowest it has been over the past 5 years and below the national average.</p> <p>Any concern received alleging verbal or physical abuse will be considered seriously under Trust Bullying and Harassment policy or Disciplinary policy which have been fully equality impact assessed and any cases raised are analysed by 9 protected characteristics.</p> <p>Clear Trust values developed with staff engagement and Leadership Qualities Framework (enabling leadership for all: living our values and leadership qualities).</p>	<p>2 Achieving</p>	<p>Emma Ashley</p>
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		<p>Local Security Management Specialist in place, ensuring that colleagues are safe and can perform their roles without fear of being subject to violence and aggression.</p> <p>Zero tolerance in place when issues of abuse from patients/ visitors towards staff –up to date policy in place for the Management of Violence and Aggression (reviewed September 2023).</p> <p>Any FTSU cases relating to bullying and harassment are shared for advice with a senior HR practitioner so that the appropriate process is followed and support offered.</p> <p>Just and Learning culture in place for managing any staff incidents fairly. Also, implemented Patient Safety Incident Response Framework (PSIRF) as an independent review and system-based approach to learn from patient safety incidents and ensure a proportionate response to improve patient safety.</p> <p>Leadership for All festival in 2023 for all staff irrespective of roles - we all influence others and have an impact in the way we 'lead ourselves', within our teams and with our service users and patients.</p> <p>Shadow Board and Senior Leadership Forums introduced.</p> <p>Encouraged FTSU champions with protected characteristics.</p>		
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		<p>Improved supervision rate recording for staff.</p> <p>Feedback from stakeholders – agreement with the rating as the Head of HR did outline that case numbers for bullying and harassment are shared on a monthly basis with JUSS and at the People and Culture Oversight Group. The behavioural framework is being consulted on currently and will support this outcome.</p> <p>Action – to ensure that when the bullying and harassment policy is reviewed to encourage more participation from staff networks.</p>		
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	<p>2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source</p>	<p>Recognise a number of Trade Unions and have active staff side available for staff.</p> <p>FTSU guardian is embedded and regularly promotes FTSU process/champions.</p> <p>Staff networks active and meet regularly through MS teams to increase access (4 out of 5 are staff led) – exec sponsors assigned and attend 50% of network meetings throughout the year</p> <p>Equality impact assessments are integrated into our policy development process (including policy review or policy creation) with support from Inclusion lead if needed.</p> <p>Support is available for staff from FTSU, HR, Unions, OH or EAP – support is also extended to witnesses of investigations/incidents.</p> <p>Bullying and Harassment policy and Policy for the Management of Violence and Aggression direct to support available.</p> <p>Opportunity to feedback through NHS staff survey and quarterly People Pulse.</p> <p>Supporting Mental Wellbeing policy.</p> <p>WRAP plans and stress risk assessment.</p> <p>Staff networks embedded: Black, Asian, Minority Ethnic (BAME) Network, Ability Network, LGBTQ+</p>	<p>2 Achieving</p>	<p>Emma Ashley</p>
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		<p>Network, Working Carers Staff Network (4 out of 5 are staff led).</p> <p>Active FTSU guardian and champions.</p> <p>Feedback – agreed with the scoring.</p> <p>Actions – for the informal feedback routes to be formalised so that qualitative data is collated and reviewed alongside quantitative data.</p>		
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	<p>2D: Staff recommend the organisation as a place to work and receive treatment</p>	<p>This question is asked in the staff survey and in the quarterly pulse survey. From Staff Survey 2022: 71.4% recommend treatment. People Pulse July 2023: 73.7% recommend treatment.</p> <p>From staff survey 2022: 56.4% recommend place to work. People Pulse July 2023: 58.9% recommend place to work.</p> <p>WRES and WDES completed annually to compare experiences of BME and disabled staff against others.</p> <p>Increased completion rate of exit questionnaires due to introduction of utilising ESR system – any concerns escalated for review.</p> <p>New reporting allows for comparison by some protected characteristics.</p> <p>Feedback – agreed with the scoring.</p> <p>Actions – to encourage completion of the surveys in the trust and understand fully why the scores are lower for staff recommending the trust as a place to work.</p>	<p>1 Developing</p>	<p>Emma Ashley</p>
<p>Domain 2: Workforce health and well-being overall rating</p>			<p>7</p>	

Domain 3: Inclusive leadership

Domain	Outcome	Evidence	Rating	Owner (Dept/Lead)
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<p style="text-align: center;">Domain 3: Inclusive leadership</p>	<p>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</p>	<p>CNO lead for health inequalities and 2 non- exec on national reference groups.</p> <ul style="list-style-type: none"> • Health inequalities and inclusion on the Terms of reference for Quality & Safety committee and People & Culture Committee. • AIS inclusion progress monitoring to SAFE OPGs and then the SAFE Operational Group (SOG) • ‘Journey of care’ for patients accessing our services/ staff stories at each board meeting. • Exec sponsors for each staff network and recently revised with Chief People Officer lead for all exec sponsors. • Celebrating Black History Month, LGBT+ History Month and working with HIVE community involvement • Social Value and Prevention pledge • Strategic risk on BAF <p>All networks meet monthly on average and execs attend on average 50% of meetings.</p> <ul style="list-style-type: none"> • Trust has a strategic equality objective, and a strategic health inequality objectives, both set out in the Inclusion and Health Inequalities Strategy. • All PID and POG processes have EQIA build into the process • NHS Staff Survey directorate level results and action plans mandated, including EDI theme – progress is monitored through people governance structure to Board. • Patient stories shared with Board regularly, often arising from patient services contacts, 	<p style="text-align: center;">2 Achieving</p>	<p>Claus Madsen</p>
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		<p>similarly lessons learned are shared across the Trust and at Board and actions, including where needed allocation of additional resources, agreed.</p> <ul style="list-style-type: none"> • Commitment to NW Anti-Racist Framework in 2024. •Wirral Pride • Black History Month support and involvement. • Exec vlog for World Menopause Day 2023. <p>Feedback: rating of Achieving was agreed</p> <p>Action: ensure Rotation of the Executive sponsors for 2024 in April 24</p>		
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	<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>	<p>Governance structure in place:</p> <ul style="list-style-type: none"> • EDI embedded in: • People and Culture Committee • Quality and Safety Committee • Board and People Committee have inclusion within business cycles, reviewed on annual basis to reflect national reporting changes. • Exception reporting from People Committee and Quality & Safety Committee escalates anything outside of the business cycle. • POG reviews inclusion impacts as part of panel business for every document presented. All P&E schemes also go through panel for sign off before progression. • Inclusion is a strategic objective for Trust embedded as part of Board and Committee papers oversight alongside BAF which was individual section for inclusion. • EQIA review as part of policy consultation for HR, corporate, and clinical policy. SOPs also screened for impact. Embedded within policy process and governance. • EDI and HI embedded within strategies 100% of ethnically diverse staff risk assessed as part of Covid 19 risk assessments. • Risk mitigations put in place, including working from home, PPE, reassignment of duties, and if needed medical suspension was an option. • Covid 19 risk assessments were completed for all staff with disabilities or LTCs, ethnically diverse staff, older staff, and staff who were pregnant, on maternity leave, or infant feeding. 	<p>2 Achieving</p>	<p>Claus Madsen</p>
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		<p>Stress risk assessment for team and individual available</p> <ul style="list-style-type: none"> • Risk assessment for pregnancy and maternity, and breastfeeding embedded within pregnancy, maternity, and adoption policy • Menopause supportive identifying of symptoms available for staff (new section added to Managing Attendance policy pending approval) • Occupational health support to identify risk and mitigation including reasonable adjustments for staff. • Workplace risk assessment embedded and led by H&S lead. <p>Staff network engagement used to develop action plans for WDES and WRES, signed off by Board via People Committee.</p> <ul style="list-style-type: none"> • BAME Staff network engagement to be used in delivery of NW Anti-racism framework action plan. • Menopause and carers support groups support development of actions relevant to inclusion actions. • LGBTQ+ Staff Network leads on Rainbow action plans and accreditation. • Workforce data used to inform all workforce plans for recruitment and retention, including where appropriate inclusion drivers and unequal impacts. • Inclusion embedded with governance, including BAF. 		
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		<ul style="list-style-type: none"> • Anti-Racism Framework commitment to but not signed as yet. • EQIA and panel including alignment to inclusion risk. • Local partnerships and collaborations. • Community engagement in place including Inclusion & Partnership Forum and engagement of stakeholders in Sharing & Celebration events • Anchor institute work in place aligning with inclusion lead for workforce alignment and general oversight. • Oliver McGowan training and roll out – 90% e learning compliance <p>Feedback: rating of Achieving was agreed</p> <p>Action: Develop a mechanism to publish EQIAs</p> <p>Action: Deliver awareness sessions to demystify processes</p>		
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	<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>	<p>All of the below have action plans embedded within governance:</p> <ul style="list-style-type: none"> • Trust is Disability Confident Employer accredited through external validation. • Trust is a Defence Employer Recognition scheme silver level holder. • Trust holds Veteran Aware accreditation. • Trust holds Rainbow badge • Trust is an Age Positive Employer. • Trust commitment to application to Employers for Carers accreditation scheme. • Trust is due to be a signatory to the sexual safety charter. • PSIRF. • Mindful Employer • Menopause Pledge <p>WRES data shows that Board and senior leaders are not representative of the trust, as the board is 100% white.</p> <p>Associate NED development role for BME applicants, positive action launching 2024.</p> <p>WDES data shows that Board is representative of the workforce and community. Under-representation is identified in the WRES and WDES action plans. Board is 55% female to 45% male, at non-executive level there are more male than female</p>	<p>2 Achieving</p>	<p>Claus Madsen</p>
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		<p>NEDS. The Trust is 88% female overall. We have a female CEO.</p> <p>Data for LGB+ is low, and for gender identity national ESR is quite restrictive so the Trust will support gender changes for staff but are restricted in options by the national record.</p> <p>Reports are updated annually and discussed at the People and Culture Committee this is then presented at Board</p> <p>Improvements have been made however the indicators do vary and not consistent in improvement</p> <p>Staff network and working group – Board senior leadership sponsorship</p> <p>Menopause Policy.</p> <p>Health and wellbeing conversations and adjustment passport includes menopause.</p> <p>Menopause to be included in new MA Policy Menopause buddy system. Menopause champions in Trust. World Menopause Day Menopause cafes including exec speaker with menopause clinical expertise. Uniforms support in hot weather, including update to policy in 2023.</p>		
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Domain 3: Inclusive leadership overall rating		6
Third-party involvement in Domain 3 rating and review		
Trade Union Rep(s):	Independent Evaluator(s)/Peer Reviewer(s):	
Joint Union Staff Side	Bridgewater Community Trust	

EDS Organisation Rating (overall rating): 23

Achieving

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
Emma Ashley – Head of HR Neil Perris – Head of Inclusion & Health Equity	2024/25
EDS Sponsor	Authorisation date
Paula Simpson/Claus Madsen	

Domain	Outcome	Objective	Action	Completion date
Domain 1: Commissioned or provided services	1A: Patients (service users) have required levels of access to the service	Improve engagement with key stakeholder organizations representing underserved or vulnerable groups or individuals to ensure and inclusion needs are addressed	Adult LD SLT to work with Inclusion team to further develop the Accessibility & Inclusion Template to include options for 'no comprehension'	30 June 24
			Sexual Health Wirral to make contact with Wirral Evolutions to improve awareness and explore further work to develop the service offer	30 June 24

	1B: Individual patients (service users) health needs are met	Ensure there are effective mechanisms in place to understand and meet patients/carers individual needs	Adult LD SLT to work with others including patients and carers and other stakeholders (incl. Wirral Evolutions & Healthwatch) to develop a more accessible feedback form that would better meet the needs of their patients and their carers.	30 Sept 24
	1C: When patients (service users) use the service, they are free from harm	Intentionally blank	Intentionally blank– no further actions identified	
	1D: Patients (service users) report positive experiences of the service	Increasing feedback mechanisms	increase the amount of patient experience feedback received by Adult LD SLT service by 30% by the end of quarter 4	31 March 25

Domain	Outcome	Objective	Action	Completion date
Domain 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	Improve awareness and access to support for named health conditions	continue to promote wellbeing initiatives for these health conditions	31 March 25

	2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source	Increase the presence of the staff voice in the development of the policy	ensure that when the bullying and harassment policy is reviewed we encourage more participation from staff networks.	30 Sept 24
	2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source	Increasing feedback opportunities for bullying and harassment and learning lessons mechanisms	For the informal feedback routes to be formalised so that qualitative data is collated and reviewed alongside quantitative data.	30 Sept 24
	2D: Staff recommend the organisation as a place to work and receive treatment	To increase completion of survey	To encourage completion of the surveys in the trust and understand fully why the scores are lower for staff recommending the trust as a place to work.	31 March 25

Domain	Outcome	Objective	Action	Completion date
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	Ensure Staff Network exec sponsors are benefiting from hearing the lived experience of members across each of our staff networks	Rotation of the sponsors for 2024	30 April 24
	3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed	To demonstrate how we measure impact of our decision making on equality and health inequalities	Develop a mechanism to publish EQIAs	30 Sept 24
		Improving staff capability around EQIA	Awareness sessions to demystify processes	30 Sept 24
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	Intentionally blank	Intentionally blank – no further actions identified		

Patient Equality Team
NHS England and NHS Improvement
england.eandhi@nhs.net

Sexual Safety Charter			
Meeting	Board of Directors		
Date	21/02/2024	Agenda Item	19
Lead Director	Claus Madsen, Chief People Officer		
Author(s)	Emma Ashley, Head of HR (E&W) and Jude Blease, Head of Safeguarding))		
Action required (please select the appropriate box)			
To Approve <input checked="" type="checkbox"/>	To Discuss <input type="checkbox"/>	To Assure <input checked="" type="checkbox"/>	
Purpose			
<p>This report provides the Board with an overview of the sexual safety of NHS staff and Patient’s National Programme and Charter.</p> <p>The principle of the programme is to ensure that every part of the NHS takes a systematic zero tolerance approach to sexual misconduct and violence, prioritising the safety of both patients and staff.</p> <p>The paper also makes a recommendation to the Board to sign up to the charter.</p>			
Executive Summary			
<p>The NHS England programme initially commenced with the Domestic Abuse and Sexual Violence Programme in July 2022, which was designed to build on safeguarding processes for protecting patients. In 2023 this was extended to support and enhance the NHS’s response to domestic abuse and sexual violence associated with NHS services and/ or premises whether experienced by patients, staff or visitors. There are a number of priority areas for the DASV team and specific requirements for Trusts are detailed further in the report.</p> <p>Claus Madsen, Chief People Officer is the identified Trust lead for the DASV initiative.</p> <p>The Sexual Safety Charter was launched in September 2023, signatories to this charter commit to taking and enforcing a zero-tolerance approach to any unwanted, inappropriate and/or harmful sexual behaviours within the workplace/place of care, and to ten core</p>			



principles and actions to help achieve this. Signatories to the charter commit to implementing all ten commitments by July 2024.

The Head of HR (Engagement and Wellbeing) and the Head of Safeguarding are working jointly on this programme, and they have reviewed the letters issued by NHS England and the supporting guidance. The gap analysis undertaken has identified the following issues:

- **Policy** Managing allegations policy and any relating safeguarding procedures, and the bullying and harassment policy all to be reviewed to ensure consistent wording and cross referencing. National guidance for the policy is due in Q4 23/24 but this initial policy review will support the Trust to have appropriate support in place more quickly and enable concerns of this nature to be proactively managed.
- **E learning** to establish if the national resources are ready to use or alternatively if there is anything that can be sourced locally from relevant stakeholders.
- **Identify support** for patients both adult and children when concerns arise. In addition, identification of support for anyone raising concerns and those who may have concerns raised about them.
- **Record** – to identify where information relating to such issues will be stored centrally in one place if possible so it can be accessed when issues arise (and so that legacy information is maintained where appropriate)

An action plan has been drafted and summarised key actions are within the presentation along with the links to the national guidance.

Risks and opportunities:

No risks identified at present

Quality/inclusion considerations:

Quality & Equality Impact Assessment completed and attached No.

Not applicable for the report

Financial/resource implications:

Not identified at this stage

The Trust Vision – To be a population health focused organisation specialising in supporting people to live independent and healthy lives. The Trust Objectives are:

- **Populations** – We will support our populations to thrive by optimising wellbeing and independence



- People – We will support our people to create a place they are proud and excited to work
- Place - We will deliver sustainable health and care services within our communities enabling the creation of healthy places

Please select the top three Trust Strategic Objectives and underpinning goals that this report relates to, from the drop-down boxes below.

Populations - Safe care and support every time	People - Improve the wellbeing of our employees	People - Better employee experience to attract and retain talent
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The Trust Social Value Intentions

Does this report align with the Trust social value intentions? Yes.

If Yes, please select all of the social value themes that apply:

Community engagement and support

Purchasing and investing locally for social benefit

Representative workforce and access to quality work

Increasing wellbeing and health equity

Reducing environmental impact

Board of Directors is asked to consider the following action

The Board is asked to be assured by the progress on the sexual safety of NHS staff and patients programme in line with the national requirements and to approve the recommendation for the Chief Executive and Chair to sign up to the Sexual Safety Charter on behalf of the Trust by June 2024 and for the Chief People Officer to sign up to the EIDA (Employers’ Initiative on Domestic Abuse) charter and register the Trust as a member by February 2024.

Report history (Please include details of the last meeting that received this paper, including the title of the meeting, the date, and a summary of the outcome)

Submitted to	Date	Brief summary of outcome
Click or tap here to enter text.	Click or tap to enter a date.	Click or tap here to enter text.



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**Wirral Community
Health and Care**
NHS Foundation Trust

Sexual safety of NHS staff and patients

February 2024

Name: Claus Madsen, Chief People Officer

Overview

- National context background
- Local actions completed
- Sexual safety in the workplace and charter aims
- Legislative and Strategic Framework
- Definitions – sexual violence, misconduct, assault, harassment
- Gap analysis conducted
- Action plan
- Further resources
- Recommendations

National context

- July 2022 NHS England established a Domestic Abuse and Sexual Violence (DASV) Programme to build on robust safeguarding processes for protecting patients, improve victim support, and focus on early intervention and prevention.
- Expanded its scope in June 2023 to support and enhance the NHS's response to domestic abuse and sexual violence associated with NHS services and/or premises, whether experienced by patients, staff or visitors.
- Launch of the NHS Sexual Safety Charter in September 2023

Local actions

- Identify lead executive as Domestic Abuse Sexual Violence – Claus Madsen
- Gap analysis undertaken jointly between Head of HR (Engagement and Wellbeing) and Head of Safeguarding
- Reviewing of existing policies and identified need for a new policy when national guidance available
- Introduce e-learning when available – mandatory requirement
- Recommendation to sign the Sexual Safety Charter
- Action plan developed
- Member of Future Platform specific workstream group

Domestic Abuse and Sexual Violence Programme

Owing to the number of patients seen daily and the number of staff the NHS employs, there is a unique opportunity to support victims and work with perpetrators, intervene early and prevent abuse; for both its patients and staff.

There are three priority areas of focus

- supporting staff,
- national leadership
- improving data collection.

Sexual safety in the workplace

- The Sexual Safety Charter was launched in September 2023, signatories to this charter commit to taking and enforcing a zero-tolerance approach to any unwanted, inappropriate and/or harmful sexual behaviours within the workplace/place of care, and to ten core principles and actions to help achieve this.
- Signatories to the charter commit to implementing all ten commitments by July 2024.

Sexual safety in the workplace charter

Those who work, train and learn within the healthcare system have the right to be safe and feel supported at work. Organisations across the healthcare system need to work together and individually to tackle unwanted, inappropriate and/or harmful sexual behaviour in the workplace. We all have a responsibility to ourselves and our colleagues and must act if we witness these behaviours.

As signatories to this charter, we commit to a zero-tolerance approach to any unwanted, inappropriate and/or harmful sexual behaviours towards our workforce. We commit to the following principles and actions to achieve this:

1. We will actively work to eradicate sexual harassment and abuse in the workplace.
2. We will promote a culture that fosters openness and transparency, and does not tolerate unwanted, harmful and/or inappropriate sexual behaviours.
3. We will take an intersectional approach to the sexual safety of our workforce, recognising certain groups will experience sexual harassment and abuse at a disproportionate rate.
4. We will provide appropriate support for those in our workforce who experience unwanted, inappropriate and/or harmful sexual behaviours.
5. We will clearly communicate standards of behaviour. This includes expected action for those who witness inappropriate, unwanted and/or harmful sexual behaviour.
6. We will ensure appropriate, specific, and clear policies are in place. They will include appropriate and timely action against alleged perpetrators.
7. We will ensure appropriate, specific, and clear training is in place.
8. We will ensure appropriate reporting mechanisms are in place for those experiencing these behaviours.
9. We will take all reports seriously and appropriate and timely action will be taken in all cases.
10. We will capture and share data on prevalence and staff experience transparently.

These commitments will apply to everyone in our organisation equally.

Where any of the above is not currently in place we commit to work towards ensuring it is in place by **July 2024**.

Legislative and Strategic Framework

Domestic Abuse Act 2021

- Positive duty to tackle domestic abuse; applies to both our patients and our staff.
- Children are recognised as victims in their own right, including when they have not suffered any physical injuries.
- Domestic abuse has a much wider definition including economic, honour and faith-based abuse, and Female Genital Mutilation. New offence of non-fatal strangulation.

Health and Care Act 2022

- Duty on ICBs to set out steps to address the particular needs of victims of abuse (including domestic and sexual abuse) in their Joint Forward Plans.

Legislative and Strategic Framework

Women's Health Strategy 2022

- Violence Against Women and Girls is seen as a public health issue.
- Greater awareness of healthcare services that can provide specialist treatment and support for victims of sexual violence and Female Genital Mutilation
- Services and staff are equipped to support victims of violence and abuse and respond to both victims and perpetrators.
- Staff who are such victims of violence are supported in the workplace

Violence Against Women and Girls Strategy 2021

- NHS England to review and build on their workforce policies to ensure safe, effective processes are in place to support staff affected by VAWG.

Definitions

Sexual violence:

Sexual violence encompasses acts that range from verbal harassment to forced penetration, and an array of types of coercion, from social pressure and intimidation to physical force.

Sexual misconduct:

Sexual misconduct describes a range of behaviours including sexual assault, sexual harassment, stalking, voyeurism and any other conduct of a sexual nature that is non-consensual or has the purpose or effect of threatening, intimidating, undermining, humiliating or coercing a person.

Sexual assault:

Sexual assault is any sexual act that a person did not consent to, or is forced into against their will. It is a form of sexual violence and includes rape (an assault involving penetration of the vagina, anus or mouth by a penis), or other sexual offences, such as groping, forced kissing, child sexual abuse, or the torture of a person in a sexual manner.

Sexual harassment:

Sexual harassment occurs when a person engages in unwanted conduct of a sexual nature that has the purpose or effect of violating someone's dignity or creating an intimidating, hostile, degrading, humiliating or offensive environment for them.

Examples of sexual harassment can include:

- *Sexual comments or jokes*
- *Displaying sexually graphic pictures, posters or photos –*
- *Suggestive looks, staring or leering*
- *Intrusive questions about a person's private or sex life, and discussing your own sex life*

Gap analysis conducted

- Full review of the managing allegations policy underway including all anticipated scenarios (Safeguarding, HR, Patient Safety and Local Security Management Specialist leads)
- Identification of related policies and SOPs for both patients and staff
- Review of Safeguarding level 3 training for children and adults
- Consideration of recording sensitive information
- Partnership with other organisations / Local Authority Designated Officer referrals
- Continually review of the NHS Futures platform for any updates to national documents – policy and training materials

Further Actions

- Update to PCOG in April 2024 on progress on the programme
- Draft an interim SOP
- Communications plan to roll out new mandatory requirements for all staff by end of 2024/25 Quarter 1

Employers' Initiative on Domestic Abuse

Our Membership Charter

We ask all our members to sign up to our Membership Charter to take effective action on domestic abuse. Our Charter sets out mutual commitments that will enable better support for employees affected by domestic abuse.

EIDA commits to...

1. Raising awareness about the role of employers in responding to domestic abuse
2. Equipping employers with tools they need to support employees affected by domestic abuse
3. Connecting our members to the right partners and initiatives for support, best practice and shared learning
4. Leveraging the voice of our employers to influence domestic abuse policy in the UK and ensuring the voice of our members is heard

Our members commit to...

1. Raising awareness among their employees of the many forms domestic abuse can take
2. Fostering a safe, supportive and open environment to allow domestic abuse to be effectively tackled in their workplace
3. Supporting employees who are affected by domestic abuse and those that report it by providing access to information and services
4. Providing education and support to help perpetrators of domestic abuse to stop
5. Sharing best practice with other employers

Recommendations to the Board

The Board is asked to be assured by the progress on the sexual safety of NHS staff and patients programme in line with the national requirements

- To approve the recommendation for the Chief Executive and Chair to sign up to the Sexual Safety Charter on behalf of the Trust by June
- For the Chief People Officer to sign up to the EIDA (Employers' Initiative on Domestic Abuse) charter and register the Trust as a member by February 2024

Further Resources

- Sexual Safety in healthcare – organisational charter

<https://www.england.nhs.uk/long-read/sexual-safety-in-healthcare-organisational-charter/>

- Domestic abuse and sexual violence leadership update – launch of the first NHS sexual safety charter

<https://www.england.nhs.uk/long-read/domestic-abuse-and-sexual-violence-leadership-update-launch-of-the-first-nhs-sexual-safety-charter/>

- Sexual safety of NHS Staff and patients

<https://www.england.nhs.uk/long-read/sexual-safety-of-nhs-staff-and-patients/>

Sexual safety in healthcare – organisational charter

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