

APPENDIX A

EQUALITY & DIVERSITY ANNUAL REPORT

ST. HELENS CLINICAL COMMISSIONING GROUP

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Foreword

There is clear evidence that people's health, their access to health services and experiences of health services are affected by their age, gender, race, sex, sexual orientation, religion/belief, transgender, marital/civil partnership status and pregnancy/maternity status. NHS St Helens Clinical Commissioning Group (CCG) strive to commission services that meet the needs of our communities; improving access and outcomes for residents and communities in the area.

ST. Helens CCG believes that equality & diversity should be embedded into all our commissioning activity as well as addressing health inequalities.

Caroline Lees –Associate Director St. Helens CCG

1.0 Introduction

This document is the CCGs annual Equality & Diversity Report which sets out how the CCG has been paying 'due regard' to the Equality Act 2010's, Public Sector Equality Duty's (PSED) three objectives to:-

1. Eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;
2. Advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;
3. Foster good relations between persons who share a relevant protected characteristic and persons who do not share it.

Protected characteristics include the age Race, sex, gender reassignment status, disability, religion or belief, sexual orientation, marriage and civil partnership status

This document outlines the CCGs approach to embedding Equality & Diversity within the organisations via the EDS 2 toolkit, setting Equality objectives, monitoring the equality performance of our key NHS providers, ensuring our workforce are supported and engaged and we have robust processes in place to consider our Public Sector Equality Duty (PSED) when we are making commissioning decisions. The report also outlines our strategy and plans to ensure we have strong engagement with people who share protected characteristics.

1.1 What is 'due regard'?

"Due regard" means that the CCGs have given *advanced* consideration to issues of equality and discrimination before making any commissioning decision or policy that may affect or impact on people who share protected characteristics. It is vitally important Equality is an integral part of what we as a CCG do.

The CCG has considered their PSED by undertaking Equality Assessments on Policy and Service changes, by undertaking their Equality Delivery Systems 2 toolkit over 2015 and by ensuring communities who share protected characteristics have a voice in how services are delivered. The CCG prides itself of our involvement of local organisations within the Community and Voluntary Sector who have expertise or who represent the issues of communities and people who share protected characteristics.

1.2 What is discrimination?

Discrimination can be direct or indirect.

Direct discrimination is when one person receives less favourable treatment than another person because of a protected characteristic. For example, if a clinic refuses to offer fertility services to a lesbian couple because they are not heterosexual, this constitutes direct discrimination on grounds of sexual orientation.

Indirect discrimination is when there is a condition, rule, policy or practice that applies to everyone, but which particularly disadvantages people who share a protected characteristic. For example, a social care provider that runs a day centre decides to apply a 'no hats or other headgear' rule to its service users. If this rule is applied to every service user, then Sikhs, Jews, Muslims and Rastafarians, who may cover their heads as part of their religion, will not be allowed to use the drop-in centre. Unless the social care provider can objectively justify using the rule, this is indirect discrimination.

The Equality and Human Rights Commission has developed guidance for users of health and social care

For more information please visit <http://www.nhs.uk/NHSEngland/thenhs/equality-and-diversity/Pages/equality-and-diversity-in-the-NHS.aspx>

1.3 What the Equality Act 2010 means for you

The Equality Act 2010 gives the NHS opportunities to work towards eliminating discrimination and reducing inequalities in care. The NHS already has clear values and principles about equality and fairness, as set out in the NHS Constitution, and the laws under the Equality Act 2010 reinforce many of these.

Most of us need to visit a doctor or may need hospital treatment on occasion. Others may rely on the NHS and social care services for help with long-term health conditions or disabilities. Whenever you need healthcare, medical treatment or social care, you have the right to be treated fairly and not to be discriminated against, regardless of your 'protected characteristics' (you can see a list of protected characteristics below). Laws under the Equality Act set out that every patient should be treated as an individual and with respect and dignity.

The laws mean that all NHS organisations will be required to make sure health and social

care services are fair and meet the needs of everyone, whatever their background or circumstances

1.4 Protected characteristics

The Equality Act 2010 offers protection to nine characteristics. These are:

- age
- race
- sex
- gender reassignment status
- disability
- religion or belief
- sexual orientation
- marriage and civil partnership status
- pregnancy and maternity

For the first time the law also protects people who are at risk of discrimination by association or perception. This could include, for example, a carer who looks after a disabled person.

This Equality and Diversity report sets out our ambitions for equality and diversity between 2015 and 2018, both in relation to staff and in delivering services to the public of Halton.

2.0 Equality Delivery Systems (EDS2)

We have adopted the Equality Delivery System (EDS2) as our performance toolkit to support us in demonstrating our compliance with the Public Sector Equality Duty. The Equality Delivery System (EDS) is a tool-kit that can the CCG improve the services we provide for our local communities, consider health inequalities in our locality and provide better working environments, free of discrimination, for those who work with us in the NHS.

The EDS has four goals key goals (with 18 specific outcomes) achieving **better outcomes, improving patient access and experience, developing a representative and supported workforce and finally, demonstration of inclusive leadership**. Each of these goals can be assessed and a grading applied to illustrate progress in achieving the outcomes and the involvement of the communities and organisations who represent the views of people with protected characteristics is important. The grading's applied as follows:

Undeveloped if there is no evidence one way or another for any protected group of how people fare or Undeveloped if evidence shows that the majority of people in only two or less protected groups fare well

Developing if evidence shows that the majority of people in three to five protected groups fare well

Achieving if evidence shows that the majority of people in six to eight protected groups fare well

Excelling if evidence shows that the majority of people in all nine protected groups fare well

2.1 The local approach to EDS 2

During 2015/16, the CCGs adopted an innovative approach to delivering the EDS 2 Toolkit; engaging with national, regional and local organisations who represent the views of people and communities who share protected characteristics. We undertook one-to-one meetings, workshops, interviews, briefings and research with partner organisations and stakeholders including to name but a few: Healthwatch, The Race Equality Foundation, Deaf Health Champions (Sick of It Report), In Trust Merseyside, , Wellbeing Ltd , Alzheimer's Society, Black Minority Ethnic Community Development Project(SHAP). The aim of the engagement was to ensure the CCGs understand the 'barriers' communities across protected characteristics face to enable the CCGs to improve access and outcomes. These barriers were considered by a formal Panel in October 2015.

The CCG recognises that patients and staff who share certain protected characteristics are less likely to complain, complete NHS surveys or access community networks to provide their feedback and this level of engagement with stakeholders will ensure that entrenched barriers communities face in relation to accessing healthcare services are understood and mitigated as part of the CCG strategic and operational programmes. Meeting and understanding the needs of people is essential to remove disadvantage and advance equality of opportunity, so we will continue to endeavour to address these issues through mainstream plans, changing service specifications, the way we monitor our NHS providers, business plans and strategies, procurement activity, contract monitoring and discussions with key partners including NHS England, the Local Authority and community, voluntary and faith sectors.

The EDS2 Panel considered the findings of our EDS2 -assessment and identified possible actions for CCGs' Equality Objective Plan and fair EDS 2 grading. This process also informed the preparation of the CCG's *EDS2 Summary Submission* to NHS England for 2015/16, which explains some of our processes.

Currently Grading for the vast majority of patient and public related services (Goals 1, 2& 4) for the CCG is assessed as **Developing**. Once these key issues are being addressed and or

mitigated via mainstream business plans then the CCG can progress from **developing** status to **achieving** status across the relevant outcomes and goals.

The EDS2 assessment for the CCGs can be viewed in **Appendix 1** below and each goal is presented alongside the national EDS 2 grading achieved by the CCGs.

3.0 NHS St. Helens CCGs Equality Objective Plan 2015/18 (Objectives appendix 2)

As a direct result of EDS 2 and Panel the CCGs has developed a specific long term Equality Objectives Action Plan, which will enable the CCG to address barriers through mainstream plans including- changes to specifications, business plans and strategies, improving procurement activity and processes, changing quality contract monitoring and enabling improved information and intelligence exchange with key partners including NHS England, the Local Authority and Community Voluntary and Faith Sector.

Some of the key issue are

- Translation and interpretation across health services remains varied and standards need to be raised via work through the Quality Contract Schedule for Secondary Care Providers and establishing a base line of standards and usage in Primary Care
- the duty carry out reasonable adjustments (Equality Act 2010) to support better access and outcomes for disabled people and frail elderly is often misunderstood, and needs to addressed via contract monitoring and collaborative work between providers
- Understanding Transgender issues across health services is a key priority and needs to be progressed further within the CCG, the services they commission and Primary Care.

The CCGs current equality objectives are:-

- To make fair and transparent commissioning decisions;
- To improve access and outcomes for patients and communities who experience disadvantage
- To improve the equality performance of our providers through robust procurement and monitoring practice
- To empower and engage our workforce

The Objective plan has mapped the Objectives, EDS 2 outcomes and Public Sector Equality Duties to each action area. The Plan can be viewed on The CCG's website under equality and Diversity.

4.0 Monitoring the Equality & Diversity performance of our key NHS providers

During the year we collaborated with neighbouring CCGs to ensure that contracts with key local NHS providers include requirements to achieve and improve equality and diversity standards, including through the Equality Delivery System.

Providers over 2015/16 were expected to:

- Agree a Smart Equality Objectives Plan;
- Complete an EDS assessments
- Provide evidence of compliance with Equality Act 2010 specific duties(including the Workforce Race Equality Standard)
- Only take decisions about service redesign after an equality analysis or equality impact assessment has been carried out to demonstrate due regard of the PSED
- Provide data on the use of translation and interpretation services.

5.0 Equality & Diversity and the Workforce

The CCG is committed to developing a representative and supported workforce and we specifically consider equality and diversity for our staff. We aim to ensure that we have fair and equitable employment and recruitment practices as well as holding up to date information about the CCGs' workforce. It should be noted that as the CCGs have a small workforce and as such we are not required under the Specific Equality Duty to publish our workforce data. However we have provided a breakdown of some of the protected characteristics (Race, Age, Sex and Disability) in Appendix 4. Over the next year our Workforce Equality plan in **Appendix 5** below will ensure we are cognisant of Equality Duties and our Workforce Race Equality Standard and that our relevant committees scrutinise the data available to them and ensure we value diversity and advance equality of opportunity for our staff.

5.1 Workforce and EDS 2

A key part of our EDS 2 (Goal 3) assessment focusses on our workforce and for the majority of our outcomes we are graded as achieving and developing status. These grades can be viewed in **Appendix 1**. By rolling out our Equality Workforce Plan over the next year we intend to progress to **achieving** across all our EDS 2 workforce outcomes.

5.2 Staff Training

Staff working within the CCGs undertakes annual equality and diversity training. The training

is designed not only as an introduction to diversity and cultural awareness, but also as a practical guide to making our organisational culture an inclusive one. It combines a focus on personal and organisational beliefs, values and behaviours and the impact they have in our interactions at workplace, internally and externally. Furthermore programme leads within the CCG who are responsible for transforming health services have received training and one to one coaching on undertaking Equality Assessment reports.

6.0 Governance and accountability

The Associate Director -Corporate Governance and the Corporate Team will be directly responsible to the Leadership Team and Governing Body of the clinical commissioning group for providing the necessary information on progress and compliance to the PSED as part of their update on equality and diversity, which is planned into the Governing Body reporting and meeting cycle.

Over the last two years quarterly update reports on our compliance and issues associated with meeting our statutory duties have taken place in our Remuneration Committee and Human Resources committee.

7.0 Conclusion

The CCG will continue to strive to ensure that the services the CCG commission are accessible to all. During the last twelve months we have made good progress around equality & diversity developing new and building on existing relationships with groups and individuals who share and represent the interests of protected characteristics. This year's EDS exercise has allowed us to fully improve our understanding of what barriers certain communities face and tackle them through mainstream processes and plans. We have developed a refreshed and long term Equality Objective Plan 2015-18 that focuses' on the internal processes we need to improve and the actions we need to undertake to tackle barriers and disadvantages certain communities face. The CCG has developed Workforce Equality & diversity Plan which aims to build on the solid foundations that are already in place. The CCG will continue to engage with the population and staff as a whole and continue to develop strong links with members of the population and groups who represent the interests of people who share protected characteristics and ensure that their views are built into the services we commission or the policies we develop.

NHS St. Helens CCG is committed to reducing health inequalities, promoting equality and valuing diversity as an important part of everything we do. This document clearly describes

the headline activity that has taken place and more importantly it sets out the work and approaches that need to be undertaken to advance equality of opportunity.

We will continue to monitor our progress against the action plan and report annually and openly on the development of this work.

APPENDIX 1 ST.HELENS CCG EDS 2 GRADES AND OUTCOMES

NHS ST.HelensCCG EDS2: The Goals and Outcomes			Grade Status
Goal	Number	Description of outcome	
Better health outcomes	1.1	Services are commissioned, procured, designed and delivered to meet the health needs of local communities	Developing
	1.2	Individual people's health needs are assessed and met in appropriate and effective ways	Developing
	1.3	Transitions from one service to another, for people on care pathways, are made smoothly with everyone well-informed	Developing
	1.4	When people use NHS services their safety is prioritised, and they are free from mistakes, mistreatment and abuse	Developing
	1.5	Local health campaigns reach communities	Developing
Improved patient access and experience	2.1	People, carers and communities can readily access hospital, community health or primary care services and should not be denied access on unreasonable grounds	Developing
	2.2	People are informed and supported to be as involved as they wish to be in decisions about their care	Developing
	2.3	People report positive experiences of the NHS	Developing
	2.4	People's complaints about services are handled respectfully and efficiently	Developing
A representative	3.1	Fair NHS recruitment and selection processes lead to a more representative workforce at all levels	Achieving

Diverse and supported workforce	3.2	The NHS is committed to equal pay for work of equal value and expects employers to use equal pay audits to help fulfil their legal obligations	Achieving
	3.3	Training and development opportunities are taken up and positively evaluated by all staff	Developing
	3.4	When at work, staff are free from abuse, harassment, bullying and violence from any source	Developing
	3.5	Flexible working options are available to all staff consistent with the needs of the service and the way people lead their lives	Developing
	3.6	Staff report positive experiences of their membership of the workforce	Developing
Inclusive leadership	4.1	Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations	Developing
	4.2	Papers that come before the Board and other major Committees identify equality-related impacts including risks, and say how these risks are to be managed	Developing
	4.3	Middle managers and other line managers support their staff to work in culturally competent ways within a work environment free from discrimination	Developing

APPENDIX 2 NHS St. Helens CCG Equality Objective Plan 2015-18

The CCGs current equality objectives are:-

1. To make fair and transparent commissioning decisions;
2. To improve access and outcomes for patients and communities who experience disadvantage
3. To improve the equality performance of our providers through robust procurement and monitoring practice
4. To empower and engage our workforce

The Objective plan has mapped the Objectives, EDS 2 outcomes and Public Sector equality Duties to each action area

APPENDIX 3 Key NHS Provider EDS 2 grades

		St Helens & Knowsley Teaching Hospitals	5 Boroughs Partnership NHS Foundation Trust	Liverpool Community Health	Bridgewater Community Healthcare NHS Foundation Trust	Alder Hey Children's NHSFT	Southport and Ormskirk Hospital NHS Trust	Aintree University Hospitals NHS Foundation Trust	MerseyCare NHS Trust	Liverpool Women's NHS Foundation Trust	Warrington and ST.HelensHospitals
Health needs:											
1.1		Yellow	Yellow	Green	Yellow	Yellow	Yellow	Yellow	Green	Green	Green
1.2		Yellow	Yellow	Green	Yellow	Yellow	Green	Yellow	Green	Green	Green
1.3		Yellow	Green	Green	Yellow	Yellow	Green	Yellow	Green	Yellow	Green
1.4		Yellow	Yellow	Green	Yellow	Yellow	Green	Yellow	Green	Green	Green
1.5		Yellow	Green	Green	Yellow	Yellow	Green	Yellow	Green	Yellow	Green
Patient Experience:											
2.1		Yellow	Green	Green	Yellow	Yellow	Yellow	Yellow	Green	Yellow	Green
2.2		Yellow	Green	Green	Yellow	Yellow	Green	Yellow	Green	Green	Green
2.3		Yellow	Green	Purple	Yellow	Yellow	Green	Yellow	Green	Green	Green
2.4		Yellow	Green	Green	Yellow	Yellow	Green	Yellow	Green	Yellow	Green
Workforce:											
3.1		Yellow	Yellow	Green	Yellow	Yellow	Green	Yellow	Green	Yellow	Green
3.2		Yellow	Yellow	Green	Yellow	Yellow	Green	Yellow	Green	Green	Green
3.3		Yellow	Green	Green	Yellow	Yellow	Green	Yellow	Green	Green	Yellow
3.4		Yellow	Yellow	Green	Yellow	Yellow	Green	Yellow	Green	Yellow	Green
3.5		Yellow	Green	Green	Yellow	Yellow	Green	Yellow	Green	Green	Green
3.6		Yellow	Yellow	Green	Yellow	Yellow	Green	Yellow	Green	Green	Green
Leadership:											
4.1		Yellow	Yellow	Green	Yellow	Yellow	Yellow	Yellow	Green	Green	Yellow
4.1		Yellow	Green	Green	Yellow	Yellow	Yellow	Yellow	Green	Green	Green
4.3		Yellow	Yellow	Green	Yellow	Yellow	Yellow	Yellow	Green	Green	Green
4.4		Yellow	Green	Green	Yellow	Yellow	Yellow	Yellow	Green	Green	Green

Grade	Colour key
Under developed	
developing	
Achieving	
Excelling	

APPENDIX 4 Workforce E&D plan

Task	Activity	Outcome	EDS comparator
Policy Proofing	<ol style="list-style-type: none"> 1. Prioritise policies 2. Identify policy against essential list¹ 3. Identify guidance with policy² and test for indirect discrimination & advancing opportunity 	<ol style="list-style-type: none"> 1. Proportional input. 2. Cover fundamental elements of Equality Act 2010 3. Impact assess process against PSED – identifying any remedial actions 	<p>3.1</p> <p>3.2</p> <p>3.4</p>
Monitoring	<p>Identify policies and performances for monitoring – check against key tasks:</p> <ul style="list-style-type: none"> • Recruitment • Selection • Review & performance • Disciplinary 	<ol style="list-style-type: none"> 1. Establish monitoring system 2. Identify indirect discrimination 3. Consider positive action or corrective action 	<p>3.1</p> <p>3.2</p> <p>3.3</p> <p>3.4</p> <p>4.3</p>
Training	Identify current training programmes linked to E&D	Proof suitability and identify gaps in provision.	<p>3.3</p> <p>4.3</p>

¹ See annex 2 and worksheet 1

² policy may be a statement of intention but the process of enacting the policy, i.e. guidance notes , also needs to be proofed

		Check profile of attendees against worker profile	
Annual review	Establish best measure for review programme	Performance of polices monitored against PSED	3.3 3.4
Publish equality Objectives	Develop and review action plan in HR committee		3.5 4.3
Staff profile and surveys	Establish staff profile and include questions on E&D	Understanding staff relationship with organisational culture to eliminate any institutional discrimination	3.4 3.6 4.3
Positive Action	<ol style="list-style-type: none"> 1. Monitor performance against policies to establish base line. 2. Identify trends 3. Establish conditions for positive action 	<p>Understanding travel of workers by protected characteristic through organisation's functions.</p> <p>Challenge barriers if data/evidence identifies them</p> <p>Advance equality of opportunity.</p>	3.2 3.5 3.1 3.3 3.5 4.1 4.3
WRES	Complete the WRES template and ensure it is in the public domain	<p>Advance Equality of opportunity and Foster good Community Relations</p> <p>Satisfy NHS England assurance processes</p>	3.1 to 3.6