

Northamptonshire Healthcare Foundation Trust Equality Delivery System 2 (EDS2) Summary Evidence Document 2017

Northamptonshire Healthcare NHS Foundation Trust provides mental health and community services to people living in the county of Northamptonshire. We also provide health services to prisons outside of the County. Our services are located in hospitals and in the community and we work closely with local councils, NHS organisations and the community and voluntary sector. Our community services provide a wide range of treatment and care for the whole community, helping to keep people out of hospital and ensuring that they receive the highest quality care. The Trust implements Integrated Care Pathways as the operational model for delivering services, therefore evidence is provided in terms of the following pathways:

- Children and adolescent mental health services
- Mental Health and
- Adult health

This report describes an overview of our approach to implement the Equality Delivery System (EDS2) and the Trust's performance against the all goals of the EDS2. We will look to continue to gather equality evidence that demonstrates compliance with the Public Sector Equality Duty (PSED) of the Equality Act (2010) across all our services and pathways. Further work is to be undertaken with internal and external stakeholders to establish the final grading of our performance. Below is the criteria used to assess our current performance under the EDS2 based on evidence received.

EDS 2 Goals	EDS Rating (RAG)	
Better Health outcomes for all	Excellent (Purple)	If our evidence shows we are of meeting all 9 protected groups
Improved patient outcomes and experience	Achieving (Green):	If our evidence shows evidence of meeting 6 – 8 protected groups
Empowered engaged	Developing (Amber):	If our evidence shows evidence of meeting 3 – 5 protected groups
Inclusive Leadership at all levels	Undeveloped (Red)	If our evidence shows evidence of meeting 0 – 2 protected groups

1. Better health outcomes

The NHS should achieve improvements in patient health, public health and patient safety for all, based on comprehensive evidence of needs and results:

1.1 Services are commissioned, procured, designed and delivered to meet the health needs of local communities

Which protected characteristics are covered?	Evidence What has actually been done / achieved?	Impact	Internal RAG rating 2017	External RAG rating 2017
<ul style="list-style-type: none"> • Age • Disability • Gender re-assignment • Marriage and civil partnership • Pregnancy and maternity • Race including nationality and ethnic origin • Religion or belief • Sex • Sexual orientation 	<p>Mental Health Pathway:</p> <ul style="list-style-type: none"> • BME Reverse Commissioning Mental Health Project – Moving ahead – meeting the needs of BME Communities. • Patient feedback through Trust 'I Want Great Care' (IWGC) • Public engagement through co-produced workshops to enable inclusion • Patient Experience Group is diverse and is the governance for co-production groups in the community and inpatient services. This is a very influential and well represented part of the trust structures and monitors and ensures inclusion. • These groups monitor and ensure inclusion • Patient involvement in staff recruitment • Local service user and carer involvement groups • Co- produced groups looking at recovery in services and also personalized care plans • Appointed a recovery lead supporting the recovery agenda in the directorate and also lead on the Recovery College and IPS employment services, this is role coordinates the promotion of the involvement agenda and supporting hope, opportunity and control for service users within our services. • We have a Crisis house which has outstanding outcomes in relation to personalised care, recovery and co-production. We are now looking to develop a business care for the crisis house in the north of the county. • Access Manager in IAPT service to ensure service users from communities engage in Services. 	<p>The impact is that the Trust is able to evidence that:</p> <ul style="list-style-type: none"> • Services are designed and delivered to maximise potential for people with protected characteristics to benefit equally • Positive patient outcomes via patient voice visible in commissioning discussions via Operations Review Meetings with CCG 		

1.2 Individual people's health needs are assessed, and met, in appropriate and effective ways

Which protected characteristics are covered?	Equality objective Evidence What has actually been done / achieved?	Impact	Internal RAG rating 2017	External RAG rating 2017
<ul style="list-style-type: none"> Age • Disability 	<p>Mental Health Pathway:</p>	<p>The impact is that the Trust is able to provide holistic services that are responsive to all communities:</p>		

<ul style="list-style-type: none"> • Gender re-assignment • Pregnancy and maternity • Race including nationality and ethnic origin • Religion or belief • Sex • Sexual orientation 	<ul style="list-style-type: none"> • <u>Care Programme Approach</u> which ensure that when service users use NHFT they have an extended care plan to support them within the community has been amended through co production and has a “my story “ section for personalised and co-produced care. • Consideration given to addressing an individual’s needs including appropriate care plans / single sex wards, we have recently swapped our wards so that the admission wards are single sex.- • A range of food options available that take in consideration spiritual needs and specific dietary requirements. • Spiritual area available. • Work with ImROC on personalised care planning from community through to inpatient wards. CPA policy is being reviewed in light of this as is the documentation. • PCLW provide assessment in GP practices to ascertain mental health needs and either provide some initial input or refer to the most appropriate service for their needs • Mental Health navigator service is provided in conjunction with MIND and these workers support people to navigate and access services in the wider community to support their wellbeing and meet their needs. This may be a mental health services or more generic activity that supports their own personal wellbeing. • IAPT service have a Equality and Diversity lead within and their work is monitored to ensure psychological therapy is available to all in the community. In addition there is a senior worker leading on access for minority groups. IAPT also have self-referrals ensuring that those who may not access Primary care / GP can access psychological therapy. • Working with MIND in relation to CQUIN on frequent attendees to develop self-referral hubs across the County and attached to Crisis Cafes. • Crisis cafes have increased across the County with 16 different sessions in Mind cafes these are self-referral and open out of hours. 	<ul style="list-style-type: none"> • Positive uptake of treatment services • Joint working for positive outcomes 	
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1.2 Transitions from one service to another, for people on care pathways, are made smoothly with everyone well-informed

Which protected characteristics are covered?	Evidence What has actually been done / achieved?	Impact	Internal RAG rating 2017	External RAG rating 2017
<ul style="list-style-type: none"> • Age • Disability • Gender re-assignment • Marriage and civil partnership • Pregnancy and 	<p>The Trust operates an integrated care pathways model and complex patient</p> <p>Mental Health pathway:</p> <ul style="list-style-type: none"> • Management structures and transformation of community services means that we have Senior management across inpatient and community services for a locality rather than separate management systems, this process promote dialogue between services and reduce unnecessary transfers. Teams are working together as one service rather than a number of separate teams. 	<p>The impact is that the Trust is able to provide that:</p> <ul style="list-style-type: none"> • Achieve smooth transfer from services to ensure continuity of care with Action plans in place to address issues 		

maternity • Race including nationality and ethnic origin • Religion or belief • Sex • Sexual orientation	<ul style="list-style-type: none"> • Regular dialogue between services to aid transfer between services • We have a transitions protocol between CAMH's and Adult CMHT and this is supported by forums at the CCG called supporting care leavers. Currently CQUIN to develop processes further- 			
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1.4 When people use NHS services their safety is prioritised and they are free from mistakes, mistreatment and abuse

Which protected characteristics are covered?	Evidence What has actually been done / achieved?	Impact	Internal RAG rating 2017	External RAG rating 2017
<ul style="list-style-type: none"> • Age • Disability • Gender re-assignment • Marriage and civil partnership • Pregnancy and maternity • Race including nationality and ethnic origin • Religion or belief • Sex • Sexual orientation 	Mental Health Pathway: <ul style="list-style-type: none"> • CQC report highlighted areas of good practice and areas for improvement across adult in-patient Services. Action plan in place to address essential and Trust initiated actions • Monitored through Datix • Learning lessons events for teams to learn for incidents and complaints • Complaints procedure develops actions plans for development and this is shared through directorate for learning and to improve safety. • All datix reports that pertain to an SI are reviewed at our DMT and then an Internal Assurance Meetings where discussion across specialty support decision making and share learning across teams. • We have appointed a clinical SI and complaints investigator who has developed process to support learning within the directorate. 	The impact is: <ul style="list-style-type: none"> • Safeguarding vulnerable adults and children are free from harm when accessing NHFT services. • Evidence of learning from adverse events that crosses services areas 		

1.5 Screening, vaccination and other health promotion services reach and benefit all local communities

Which protected characteristics are covered?	Evidence What has actually been done / achieved?	Impact	Internal RAG rating 2017	External RAG rating 2017
	Mental Health Pathway: <ul style="list-style-type: none"> • BME Reverse Commissioning Mental Health Project – Moving Ahead working closely with BME service users and community leaders to increase awareness of mental health services provided locally. • All service users are encouraged to use primary health services for national screening 	The impact is: <ul style="list-style-type: none"> • High rates of referrals from all groups to receive preventive support • Signposting to support physical health and wellbeing. 		

	<p>programmes, physical health programmes</p> <ul style="list-style-type: none">• VTE, falls prevention and ECG's are undertaken routinely when admitted to wards.• All PCART's's have a physical health check clinic particularly for those on mental health medication but can be adapted for those outside of this remit if indicated.• Primary Care liaison workers work within GP practices and so support the health care screening initiatives informing the service users they see.			
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2. Improved patient access and experience				
The NHS should improve accessibility and information, and deliver the right services that are targeted, useful, useable and used in order to improve patient 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				
Which protected characteristics are covered?	Evidence What has actually been done / achieved?	Impact	Internal RAG rating 2017	External RAG rating 2017
	<p>In 2012, the Trust undertook age equality audit to prepare for the ban on age discrimination in the provision of goods and services. Corporately, service users have the right to challenge services or raise a complaint.</p> <p>Mental Health Pathway:</p> <ul style="list-style-type: none"> • Self-referral for known service users available through the single access point in the community and particularly advocated in IAPT. In addition CATSS is also self-referral. • Exclusion criteria are based on service specification rather than protected characteristics • Crisis cafes across the county ran in conjunction with MIND for self-referral and access directly into NHFT services as required. 	<p>The impact is:</p> <ul style="list-style-type: none"> • Self-referral for service users • Increased access to support 		
2.2 People are informed and supported to be as involved as they wish to be in decisions about their care				
Which protected characteristics are covered?	Evidence What has actually been done / achieved?	Impact	Internal RAG rating 2017	External RAG rating 2017
All protected groups	<p>Corporately, the Trust has three Patient Experience Groups for each pathway which allows service users to be involved and give feedback in the development of trust plans and programmes. Service User Involvement is a key part of our Organisational culture and we have a new Service User Involvement Strategy 2016 / 2017.</p> <p>Record Keeping Audit provides evidence of how regularly and routinely service users are involved in the development of their care plans.</p> <p>Mental Health Pathway:</p> <ul style="list-style-type: none"> • BME Reverse Commissioning Mental Health Project - one of the key outcomes was that individual requirements related to race or faith is reflected in care plans. • Working with IMROC to improve co-production of all services as well as individualised care. Our MH PEG and co-production groups are monitoring involvement in all clinical areas of the directorate and supporting co-production at a local level. Co-production is embedded in all service development, recruitment, transformation and direct clinical care. • Recovery principles reflected in all service specs and operational policies. • MHTB developing a Outcomes based commissioning framework based on I statements by co- 			

produced group who have engaged with the public. This will be the foundation of future multi agency transformation in mental health

2.3 People report positive experiences of the NHS

Which protected characteristics are covered?	Evidence What has actually been done / achieved?	Impact	Internal RAG rating 2017	External RAG rating 2017
	<p>I Want Great Care (IWGC) is a commercial feedback system which allows patients, their carers and family members, to give feedback about their care and treatment at any time during treatment or on discharge. This feedback can be given on paper form, through a web based computer application or via the IWGC public website. The system collects data across the protected characteristics of:</p> <ul style="list-style-type: none"> • Age • Disability • Ethnicity • Sex / gender <p>The Friends and Family Question (would you recommend this service to friends and family if they needed similar care and treatment – an NHS England requirement), it invites respondents to score service on dignity and respect, kindness and compassion of staff, information about and involvement in care and treatment (there are additional categories for children and young people). Respondents can also leave free form comments about good aspects of care and suggestions for improvements. All reviews (unless requested by the reviewer) are available on the IWGC public website.</p> <p>Mental Health Pathway:</p> <ul style="list-style-type: none"> • Patient experience feedback through IWGC • Complaints feedback to service delivery teams • PALS • Incident reporting • Service user and carer involvement forums • Compliments 	<p>The impact is:</p> <ul style="list-style-type: none"> • We are able to annually analysis feedback by the protected characteristics to identify merging trends and identify underrepresentation. 		

2.4 People's complaints about services should be handled respectfully and efficiently

Which protected characteristic is the focus of this issue?	Equality objective Evidence What has actually been done / achieved?	Impact	Internal RAG rating 2017	External RAG rating 2017
All protected characteristics	<p>The Trust has a number of policies to ensure that service users and staff are treated with dignity and respect even when making a complaint or raising a concern. The Trust has:</p> <ul style="list-style-type: none"> • Maintaining Service User Privacy and Dignity Policy • Management of Complaints Policy • Equality Monitor across all protected characteristics. • Combined complaints/PALS leaflet • Complaints/PALS leaflet available in 5 top languages (and any other language upon request), larger print and braille • Posters detailing how to contact PALS/Complaints have been distributed throughout the trust • Pop up banners are displayed in key areas across the trust • Complaints/PALS poster available in 5 community languages (and any other language upon request), larger print and braille • Every complainant is offered a local resolution meeting as well as a written response • Advocacy is offered to all complainants • Complaints/PALS can be made verbally, email, letter or by the internet online form • A robust complaints and PALS system has been put into place enabling complaints to receive their responses in a timely fashion • The complaints/PALS listening booth is visible around the trust • Complaints/PALS have a stand at various wellbeing events and forums • Floor walks are made on wards around the trust to capture any ongoing concerns • Complaint management surveys are undertaken to ensure that complainants are happy with the service provided • Quarterly Complaints Review Committee held whereby peer reviews are undertaken on closed complaints • All complaints and PALS are discussed at the Patient Experience Group • All PALS/complaints staff have received full training and are equipped to deal with any situation that is put to them 	<p>The impact is that:</p> <ul style="list-style-type: none"> • All complaints receive a fair hearing from the Complaints and PALS. • Equality monitoring is analysed for complaints • Efforts have been made to ensure the service is accessible to improve the process of raising a complaint or raising a concern. 		

3. A representative and supported workforce				
The NHS should Increase the diversity and quality of the working lives of the paid and non-paid workforce, supporting all staff to better respond to patients' and communities' needs				
3.1 Fair NHS recruitment and selection processes lead to a amore representative workforce at all levels				
Which protected characteristic is the focus of this issue?	Equality objective Evidence What has actually been done / achieved?	Impact	Internal RAG rating 2017	External RAG rating 2017
All protected groups.	<p>All Trust policies are agreed through the Trust Partnership Forum and have an Equality Analysis completed. HR workforce data is annual analysed as part of the annual Equal Information Report.</p> <ul style="list-style-type: none"> • HR processes and policies. • Staff Survey • Flexible working • Appraisal • Supervision • Engagement with service development • Personal data is made anonymous to the recruiting manager. • Two ticks employer – guaranteed interview for candidates with a disability subject to meeting the minimum essential criteria for post. • Currently implementing the NHS Workforce Race Equality Standard and developed an Action plan to address any disparities relating to race. • Service User and Carer participation in recruitment and selection processes 	<p>The impact is that:</p> <ul style="list-style-type: none"> • We annually analyse data across of HR to ensure that practises are fair and robust systems are in place to prevent any form of discrimination. • The Trust is able to ascertain how the workforce reflecting the diversity of the local population through the data analysis 		
3.2 The NHS is committed to equal pay and for work of equal value and expects employers to use equal pay audits to help fulfil their legal obligations				
Which protected characteristic is the focus of this issue?	Equality objective Evidence What has actually been done / achieved?	Impact	Internal RAG rating 2017	External RAG rating 2017
All protected groups.	<p>Agenda for Change pay rates to all staff entering the organisation. This supports equal pay for all staff regardless of any protected characteristics.</p> <ul style="list-style-type: none"> • Upon internal movement of staff, HR sense checking mechanism in place to prevent more and less favourable amendments to contracts. • Maternity pay incorporates continued incremental progression. • Processes in place to support staff of maternity through organisational change processes. • HR policies and procedures cover all of the above. 	<p>The impact is that as a Trust implementing Agenda for Change and its national job evaluation scheme:</p> <ul style="list-style-type: none"> • This complies fully with anti-discrimination legislation <p>The Trust will be looking to review our equal pay through NHS Employers Equal pay toolkit available to ensure we have no discrepancies.</p>		
3.3 Training and development opportunities are taken up and positively evaluated by all staff				
Which protected characteristic is the focus of this issue?	Equality objective Evidence What has actually been done / achieved?	Impact	Internal RAG rating 2017	External RAG rating 2017

All protected groups	<p>The Trust Learning and Development team look to ensure that all staff have access to learning and development opportunities, for example:</p> <ul style="list-style-type: none"> • Access to learning and development activities are open to all employees these range from mandatory training, personal development, management development and coaching. • Team building sessions have been designed to support teams through change and enhance team cohesion • Learning and development have supported a number of bespoke projects (BME leadership/Unplanned care leadership) • 1:1 coaching interventions are available to all employees exploring developmental goals – this is between one and six 1.5hrs coaching sessions • Learning & development are responsive to team development and facilitate a range of bespoke sessions to meet individual team needs based on SIs/Complaints/feedback • Access to external funding is available to employees for external training not offered within NHFT of which will benefit the team/organisation • Learning & Development regular review all training sessions to ensure that most effective and appropriate methods of delivery are used and available to employees such as face to face sessions/e-Learning/workbooks • Face to face sessions are inclusive of all, engaging, encourage participation and sharing ideas • Learning & Development are reviewing session content across all training to ensure learner participation and variety of learning methods is used to meet individual learning styles • Regular reviewing and monitoring takes place to review the uptake of training across all protected characteristics 	<p>The impact is that :</p> <ul style="list-style-type: none"> • the Trust is able to provide training needs are addressed for individual and team/service needs 	
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3.4 When at work, staff are free from abuse, harassment, bullying, and violence from any source

Which protected characteristic is the focus of this issue?	<p align="center">Equality objective Evidence What has actually been done / achieved?</p>	Impact	Internal RAG rating 2017	External RAG rating 2017
All protected groups	<p>The Trust</p> <ul style="list-style-type: none"> • All HR processes and policies have an Equality Analysis undertaken. • Staff Survey are analysed by protected characteristics as part of the annual Equality Information Report. • New Freedom to Speak Up Policy – to encourage staff to raise concerns, with detailed Equality Analysis • Whistleblowing helpline with feedback mechanism to resolve individual issues as well as capturing key themes. • Bullying and Harassment Policy to fairly resolve individual instances. 	<p>The impact is that:</p> <ul style="list-style-type: none"> • On-going development of organisational culture which promotes an environment where staff feels able and willing to speak up. 		

	<ul style="list-style-type: none"> Wellbeing support packages are available through OH, counselling services to provide appropriate individualised support for staff. 3 staff networks that raise issues and concerns relating to a protected characteristic. 			
3.5 Flexible working options are available to all staff, consistent with the needs of the service, and the way people lead their lives				
Which protected characteristic is the focus of this issue?	Equality objective Evidence What has actually been done / achieved?	Impact	Internal RAG rating 2017	External RAG rating 2017
All protected groups	<p>The organisation has a number of mechanism in place to support staff to work more flexibly:</p> <ul style="list-style-type: none"> HR processes and policies in place covering all staff who hold qualifying length of service. Flexible working options are determine solely based on service and not individually discriminated. HR Business Partner support on hand for individual queries and advice. The HR works closely with the staff networks and are able to identify emerging barriers for the workforce e.g relating to disability and sickness where reasonable adjustments maybe required. 	<p>The impact is that managers are able to:</p> <ul style="list-style-type: none"> Work with staff to fulfil their roles and creating a family friendly workforce. 		
3.6 Staff report positive experiences of their membership of the workforce				
Which protected characteristic is the focus of this issue?	Equality objective Evidence What has actually been done / achieved?	Impact	Internal RAG rating 2017	External RAG rating 2017
All protected groups	<p>The Trust has a culture of shared leadership and has three main inclusive staff networks for :</p> <ul style="list-style-type: none"> BME, LGBT Disability <p>The staff networks are involved in a number of activities across the organisations:</p> <ul style="list-style-type: none"> Annual NHFT Leadership Conference Quality Awards Delivering specific projects – BME Reverse Commissioning Mental Health Project LGBT Health and Well-being event Disability Aware Day Stakeholder participation in the senior level recruitment, <p>Staff engagement is positively reported in the staff survey results however through implementation of the WRES further work has been identified for BME staff. Likewise we staff survey results are increased in of disability.</p>	<p>The impact is that:</p> <ul style="list-style-type: none"> The trust is able to develop an inclusive leadership culture. 		

4 Inclusive leadership				
NHS organisations should ensure that equality is everyone's business, and everyone is expected to take an active part, supported by the work of specialist equality leaders and champions				
4.1 Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations				
Which protected characteristic is the focus of this issue?	Evidence What has actually been done / achieved?	Impact	Internal RAG rating 2017	External RAG rating 2017
All protected groups	<p>The Trust has an Equality and Inclusion Assurance Board (EIAB) which reports to the Trust Quality and Governance Committee and the Trust Board as mechanism of ensuring good governance around eq .</p> <p>Members of the EIAB include:</p> <ul style="list-style-type: none"> • Director of Nursing and Quality • Director of HR and OD • Non-Executive Director • Chairs of the staff networks • Operational pathway leads <p>The forum provides both a leadership role for our equality and inclusion work and a check and balance on the direction of the equality and inclusion work.</p>	<p>The impact is that the Trust is</p> <ul style="list-style-type: none"> • Able to evidence good governance and leadership regarding equality and meeting the requirements of PSED 		
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				
Which protected characteristic is the focus of this issue?	Evidence What has actually been done / achieved?	Impact	Internal RAG rating 2017	External RAG rating 2017
All protected groups	<p>The Trust has a number of mechanism to ensure that Equality Analysis is part of key decision making.</p> <p>All</p> <ul style="list-style-type: none"> • Policies • QIPP and CIP decisions • Transformations <p>Have an equality analysis section. In an addition to this:</p> <ul style="list-style-type: none"> • All Trust Board Papers have an Equality consideration section that must be completed. <p>Further work is required to ensure that this is audited and reviewed.</p>	<p>The impact is that the:</p> <ul style="list-style-type: none"> • Decisions and risk relating to equality are highlighted to the Board and senior decision making. However further work will be undertaken to ensure that this is regularly monitored and outcomes are achieved. 		
4.3 Middle managers and other line managers support and motivate their staff to work in culturally competent ways within a work environment free from discrimination				
Which protected characteristic is the focus of this issue?	Evidence What has actually been done / achieved?	Evidence	Internal RAG rating 2017	External RAG rating 2017
All protected groups	<p>The Trust has two mechanism of ensuring that staff work in culturally competent ways:</p> <ul style="list-style-type: none"> • Training • Service User Involvement 			

Through the BME Reverse Commissioning Project staff worked with BME Service Users and Community Leaders on how to be work in culturally competent ways. A Cultural Competence Toolkit is in development for 2017

