

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>Children's Pathway:</p> <ul style="list-style-type: none"> • CAMHS services should place them and their parents/carers at the heart of everything they do. The overarching aim of the service will be to provide specialist services to improve the emotional/mental health outcomes of all children and young people within Northamptonshire. Services are commissioned, procured and designed to provide a countywide service which provides high quality advice, information support and interventions to ensure all children and young people obtain the support needed to meet their emotional, physical and medical health needs. Services are tiered according to the level of need of each young person. • Services offer a single point of contact via the Referral Management Centre and are subject to an initial multi-disciplinary assessment of all referrals this ensures that there is no 'wrong door' and young people are receiving the 'right service the first time' . The Introduction of the CAMHS consultation line and 'CAMHS Live' have allowed for further cementation of this approach. • CAMHS services are commissioned to meet the needs of the local population which is set by a national agenda and aim to ensure that the needs of the local population are met. • CAMHS provides a service to all children and young people up to the age of 18 and their parents/carers where appropriate. Some children will require the service to be provided up to their 19th birthday. • In accordance with the Equality Act 2010 (section 149) the service will not discriminate against service users or carers on grounds of their protected characteristics: gender reassignment, marriage or civil partnership, race, religion or belief, sex or sexual orientation. Where appropriate the service will make reasonable adjustments for services users and carers, who may need information in alternative formats or languages or require interpreters or provide appropriate assistance. The service will ensure that all environments are physically accessible. • Where appropriate and relevant services will consult and engage with diverse communities. CAMHS services employs a Specialist Practitioner with Special Interest in Gender and Sexual Identity. CAMHS employ a participation worker to gain comprehensive and qualitative feedback from young people to ensure that commissioning arrangements meet the needs of the patient population. • The referral management team will consider the needs of those with a learning disability on a case by case basis, there will be consideration of whether the needs of young people with a learning disability may have their needs met within a specialty learning disability service. For example those with a severe learning disability. 	<p>The impact is that the Trust is able to evidence that:</p> <ul style="list-style-type: none"> • Positive parent experience, with good feedback from parents and young people. This is captured via I want great care feedback. • A successfully commissioned service will be evidence by short waiting times and referrals that are promptly and effectively managed. 		

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 • Gender re-assignment • Pregnancy and maternity • Race including nationality and ethnic origin • Religion or belief • Sex • Sexual orientation 	<p>Children's Pathway:</p> <ul style="list-style-type: none"> • Care Programme Approach which ensure that when young people access CAMHS services they have an extended care plan to support them within the community and within inpatient settings. CPA is used as standard within inpatient CAMHS however within community CAMHS it is not used consistently • Young people are able to co-produce their own care plans. • There is a pathway and dedicated worker for young people to enable support with sexuality and gender identity. • Within inpatient services there is a designated spiritual area and cultural and spiritual education is offered within the education provision in inpatient services. • An area that needs development within community that all parts of community are represented in our displays • A range of food options available within inpatient services that take in consideration spiritual needs and specific dietary requirements. • There is also a designated single gender space. • CAMHS services offer child and young people friendly environments, rooms contain games and books designed to engage younger children. • Those with physical disabilities are able to access and CAMHS services via adapted entry. Inpatient services have an accessible bathroom and bedroom if required. All staff must undertake mandatory training to ensure they have a good understanding of learning disabilities, equality and diversity 	<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"> • Positive uptake of treatment services • Positive feedback from IWGC. • CPA is well known 		

1.3 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 maternity • Race including nationality and ethnic origin • Religion or belief • Sex • Sexual orientation 	<p>Children's pathway:</p> <ul style="list-style-type: none"> • NHFT has an integrated team for Looked After Children (LAC) concerned with the physical health, mental health and emotional wellbeing of this vulnerable population. • There is a current focus on improving transitions for young people reaching the age of 18, standards include: ensuring that there is a smooth and timely transition into adult mental health services including a robust handover process which includes meaningful involvement from young people and their parents/carers. When transition to adult mental health services is not clinically required, a process has been developed around transition to primary care services. Current CQUIN is focusing on transitions. Transition policy has now been approved. 	<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. • Positive feedback from young people who have experienced transition, captured through pre and post transition questionnaire as per CQUIN standards. 		

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 	<p>Children's pathway:</p> <ul style="list-style-type: none"> • The Trust has a specific team for Children's Safeguarding to ensure that safeguarding is everybody's business and all Trust staff have a responsibility and duty of care to safeguard children and adults. – ongoing and embedded • NHFT is a member of Northamptonshire Safeguarding Children Board (NSCB) – ongoing • CQC report highlighted areas of good practice and areas for improvement across Children's Services. When CQC returned they were supportive of the improvements that had been made. Action plan in place to address essential and Trust initiated actions • Children's service is part of lessons learnt strategy. Is standard agenda item on all team meetings • Lone worker policy being reviewed by Deputy Director Jean Knight to improve staff safety. • Freedom to speak up implemented (to all services)/whistleblowing policy Complaints procedure develops actions plans for development and this is shared through community services for learning and to improve safety. Quarterly review with service user involvement 	<p>The impact is:</p> <ul style="list-style-type: none"> • Safeguarding vulnerable adults and children are free from harm when accessing NHFT services. 		
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
<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>Children's pathway:</p> <ul style="list-style-type: none"> • Immunisation programme well established within SN, vaccines delivered annually with high uptake rates – This now includes children not within a school setting (e.g. home schooling) • Recently SN service was commissioned to provide Flu-enz nasal immunization for school Year 1&2 – now expanded to cover reception to year 4. • 0-19 services offer a universal screening programme in accordance with the healthy child programme(national screening programme) 	<p>The impact is:</p> <ul style="list-style-type: none"> • High percentage of the population received the universal screening programme) 		

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
<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>In 2012, the Trust undertook age equality audit to prepare for the ban on age discrimination is the provision of goods and services. Corporately, service users have the right to challenge services or raise a complaint.</p> <p>Children's Pathway:</p> <ul style="list-style-type: none"> • 0 – 19 services are provided to all children resident within Northants. Introduction of admin hub provides centralised access point. • HIV services provided to all patients who wish to access them in Northants, regardless of residency. • All notified diabetic patients invited to screening at least annually and referred where treatable disease is discovered. • Self-referral available in some services - SN, Sexual Health, Dentistry. • Referral Management center established for children's specialist services, to simplify referral process and ensure patients are directed to appropriate services within NHFT. 	<p>The impact is: Improved accessibility and speed of access.</p>		
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>Children Services:</p> <ul style="list-style-type: none"> • Consent processes in place throughout Children's & Ambulatory Services to encourage active participation of patients in decisions about their care. (Records audit) – ongoing and embedded • Patient feedback through I Want Great Care (IWGC) • New access to records process which enables service users to more easily access their records (all pathways) 			
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>Children’s Pathway:</p> <ul style="list-style-type: none"> • Patient experience feedback through IWGC • Complaints feedback to service delivery teams • PALS • Incident reporting 	<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 	<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. 		

	<ul style="list-style-type: none">• 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			
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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 more 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. 	<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 Introduction of Leadership matters 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 e.q . 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 mechanisms to ensure that Equality Analysis is part of key decision making. 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

