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 asses 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
• Age • Disability • Gender re-assignment • Marriage and civil partnership • Pregnancy and maternity • Race including nationality and ethnic origin • Religion or belief • Sex • Sexual orientation	**Adults Pathway:** • Equality Impact Assessment (Equality Analysis) of Nursing Transformation Programme • Stakeholder involvement through consultation –Enteral PEG feed re-tender, Diabetes Network *(Countywide), Advanced Nurse Prescriber Job Specification • Extensive service user involvement with the development with the Palliative Care Strategy. • Transition pathways in individual services for children's to adults, i.e. joint clinics • Clinical Senate report into the health needs of local diabetic foot patients • User involvement regarding the development of the Laryngectomy service and drop in clinical at NGH & KGH • Local service users and wider regional / national users involved in the development and delivery of the Laryngectomy Swimming training (one of only two in the Country • Stake holders involved in the Stroke Pathway from Acute through to community. • Patient feedback through Trust 'I Want Great Care' (IWGC) • Unplanned Intermediate Care commissioned as a countywide community resource including the delivery of Intra venous therapy, so able to flex to meet on the day demands in anyone locality to keep people in their own home.	The impact is that the Trust is able to evidence that: • Positive patient experience, with good feedback. • Services are designed and delivered to maximise potential for people with protected characteristics to benefit equally. • Positive patient outcomes 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
Age • Disability • Gender re-assignment • Pregnancy and maternity • Race including nationality and ethnic origin • Religion or belief • Sex • Sexual orientation	**Adult's Pathway:** • Adult Speech & Language Therapy provides individual patient centred, therapy programmes and uses evidence based practise and clinical Outcome Measures to measure effectiveness. • Adult Services provides individual patient centred advice, with individual care plans tailored to the patient and their needs. • Patients assessed within their own environments so better placed to understand the full range of there, and their carers, needs, so reducing the need for admission to hospital. Holistic assessment which includes both physical, mental and social needs	The impact is that the Trust is able to provide holistic services that are responsive to all communities: • Positive uptake of treatment services • Early access • Early intervention		

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**
• Age • Disability • Gender re-assignment • Marriage and civil partnership • Pregnancy and maternity • Race including nationality and ethnic origin • Religion or belief • Sex • Sexual orientation	The Trust operates an integrated care pathways model and complex patient **Adult Pathway** - Stroke patients who move from the acute pathway through to the Community Stroke team / community stoke beds have a seamless service from Adult Speech & Language Therapy. - Excellent communication processes in place for patients moving from Acute to Community services that require S&LT as the service is countywide Acute and Community. - Work in partnership with children's services to understand needs of high intensity users who may in future require services of adult intermediate care service. Developing anticipatory care plans as needs be - Diabetes patients who are transitioning from paediatric-led services into adult services are supported via a series of joint transitional clinic appointments. - Children who are being seen with the Nutrition and Dietetics pathway are supported into adult services where on-going treatment is required. This is via joint clinics and shared decision making	**The impact is that the Trust is able to provide that:** Achieve smooth transfer from services to ensure continuity of care with **a**ction plans in place to address issues		
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**
• Age • Disability • Gender re-assignment • Marriage and civil partnership • Pregnancy and maternity • Race including nationality and ethnic origin • Religion or belief • Sex • Sexual orientation	**Adult Pathway** - CQC report highlighting areas of good and excellent practice. - No mistakes / complaints from users re Adult Speech & Language Therapy. - CQC report 2017 highlighted areas of good practice and areas for improvement across Adult Services. Action plan in place to address essential and Trust initiated actions - Process to identify risks within services and escalate to Safeguarding as necessary - Robust process for the sharing of learning from complaints, PALS enquiries and Serious Incidents across services and teams - Participation in SIRC, Clinical Reviews and Complaints Review Committee activity - Staff attendance at PREVENT/WRAP training - Use of Clinical Reviews as case study learning tools in teams and supervision - Robust recording of all types of supervision within teams	**The impact is:** - 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
	Adults Pathway: • Automatic screening for all patient's referred to services for wellbeing related issues e.g. smoking and alcohol • Annual influenza vaccination campaign in accordance with CCG commissioning requirements	**The impact is:** • High rates of referrals from all groups to receive preventive support		

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**
	Adults Pathway: • Unplanned care/ intermediate care provides a service to all adults who are registered with a Northants GP. Accept referrals via a single point of access from a wide range of health and social care professional and patients with an anticipatory care plan • Planned Care provides a service to all adults who are registered with a Northants GP. Accept referrals via a single point of access from a wide range of health and social care professional and patients with an anticipatory care plan • MSK Physiotherapy, Diabetic and High Risk Foot patients are able to access services based on specified eligibility in line with commissioned contract. All eligibility criteria is available via our public website or on request in other formats • For services with eligibility access criteria we operate a referral screening process			
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	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. Record Keeping Audit provides evidence of how regularly and routinely service users are involved in the development of their care plans. **Adults Pathway:** • Consent processes in place across Unplanned care to ensure patients informed of care and can actively participate. (records audit) • CQC report evidence of good practice in this area • Patient feedback through I Want Great Care (IWGC) • Consent also required at point of referral to service i.e. is patients aware of referral? • Development of individual care plans with Three Change Check process for patients with long terms conditions under the care of an Advanced Nurse Practitioner • Use of Advance Directives/Advance Care Plans in palliative and long term conditions presentations • Development and roll out of 'My Catheter Passport'			

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**
	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: • Age • Disability • Ethnicity • Sex / gender 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. **Adults Pathway:** Patient experience feedback through IWGC • Complaints feedback to service delivery teams • PALS • Incident reporting • Diabetes Network Meeting • Service User involvement in design of education programmes in MSK physiotherapy • Attendance at Northamptonshire Carers Café events • Engagement with local groups representing those patients for whose characteristics are protected i.e. Age UK group, SERVE E Northants, St Johns Ambulance Cadet Division, Wellingborough Sikh Association, Northamptonshire Afro-Caribbean Association etc.	**The impact is:** • 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	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: • 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	**The impact is that:** • 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.		

	- 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	

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.	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. • 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	**The impact is that:** • 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.	Agenda for Change pay rates to all staff entering the organisation. This supports equal pay for all staff regardless of any protected characteristics. • 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.	The impact is that as a Trust implementing Agenda for Change and its national job evaluation scheme: • This complies fully with anti-discrimination legislation The Trust will be looking to review our equal pay through NHS Employers Equal pay toolkit available to ensure we have no discrepancies.		
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	The Trust Learning and Development team look to ensure that all staff have access to learning and development opportunities, for example:	The impact is that :		
	• 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	• the Trust is able to provide training needs are addressed for individual and team/service needs		

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?	Equality objective Evidence What has actually been done / achieved?	Impact	Internal RAG rating 2017	External RAG rating 2017
All protected groups	The Trust • 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.	**The impact is that:** • On-going development of organisational culture which promotes an environment where staff feels able and willing to speak up.		

			Internal RAG rating 2017	External RAG rating 2017
	• 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	The organisation has a number of mechanism in place to support staff to work more flexibly: • 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.	The impact is that managers are able to: • 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	The Trust has a culture of shared leadership and has three main inclusive staff networks for : • BME, • LGBT • Disability The staff networks are involved in a number of activities across the organisations: • 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, 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.	The impact is that: • 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	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 . Members of the EIAB include: • Director of Nursing and Quality • Director of HR and OD • Non-Executive Director • Chairs of the staff networks • Operational pathway leads 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.	**The impact is that the Trust is** • 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 March 2017	External RAG rating 2017
All protected groups	The Trust has a number of mechanism to ensure that Equality Analysis is part of key decision making. All • Policies • QIPP and CIP decisions • Transformations Have an equality analysis section. In an addition to this: • All Trust Board Papers have an Equality consideration section that must be completed. Further work is required to ensure that this is audited and reviewed.	**The impact is that the:** • 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	The Trust has two mechanism of ensuring that staff work in culturally competent ways: • 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 | | | | | |