## Agenda item | Title | Executive Director lead and presenter | Report author
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 | Equality Delivery System 2 (EDS2): Goals 1 & 2 Outcomes |  | Mayur Bhatt – E&D Advisor

### This report is for:
- Decision: X
- Discussion
- To Note

### History

### The following issues have been identified and assessed within this report

**Equality**
- EDS2 provides an essential framework to identify equality outcomes, and enables the Trust to continue to strengthen its equality commitments

**Quality**
- N/A

**Privacy**
- N/A

### Executive summary of key issues

- The Trust's assessment against outcomes under EDS2 Goals 1 & 2 provides a firm and thorough baseline assessment which members are asked to agree and approve.
- The baseline assessment provides clear focus on what the Trust needs to do to progress on its service user focused equality commitments.
- Under Goal 1, the grading of ‘Developing’ has been given in 3 out of 4 related outcomes. One outcome has been graded as ‘Un-developed’.
- Under Goal 2, the grading of ‘Achieving’ has been given in 3 out 4 related outcomes. One outcome has been graded as ‘Developing’.
- The Trust has a strong opportunity to adopt Goals 1 & 2 as the Trust’s service user focused equality objectives for 2016 – 2019, with the aim of progressing towards at least ‘Achieving’ status across all the stipulated outcomes, and ‘Excellence’ where current grading is already ‘Achieving’

### This report addresses these strategic priorities:

- We will deliver the best care: X
- We will support and develop our staff: X
- We will continually improve what we do: X
- We will use our resources wisely
- We will be future focussed: X
1 Introduction

The Equality and Diversity System 2 (EDS2) forms a standard requirement in our contract with NHS England, including reporting arrangements to the South West Commissioning Support Unit.

The main purpose of the EDS2 is to help local NHS organisations to review and improve their performance for people with characteristics protected by the Equality Act 2010.

EDS2 contains four goals, each with their associated outcomes. The four goals are:

- Goal 1: Better Health Outcomes
- Goal 2: Improved patient access and experience
- Goal 3: A representative and supported workforce
- Goal 4: Inclusive Leadership

This report provides assessment against stipulated outcomes under goals 1 and 2 which are related to our Service Users.

Assessment against Goals 3 and 4, which are related to internal workforce related matters, was presented to the Strategic Workforce Group in November 2014.

2 Grading performance and evidence gathering

For each outcome, the Trust is required to find suitable evidence that demonstrates the level of progress and grade of our performance. The EDS2 framework provides stipulated grading based on the amount of information and assessment across all the protected characteristics.

For most outcomes the key question is how well do people from protected groups fare compared with people overall? There are four grades overall:

- **Undeveloped** if there is no evidence one way or another for any protected group of how people fare or 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

An evidence based approach is essential to provide a clear and meaningful assessment. The main evidence sources for our assessment have been:

- Service Specifications and Standing Operational Procedures
- Outcomes of Friends and Family Tests
- Annual Community Mental Health Survey
- Analysis of PALS and Complaints data
- Analysis of Compliments data
- Relevant Policies and Protocols
- Serious Incident Report and Data

The EDS2 framework suggests sources of evidence that may be used, and stipulates the approach for assessment. For example, outcome 1.1 relating to ‘Services are commissioned, procured, designed and delivered to meet the health needs of local communities’ the framework stipulates the following:

- Choose one or more care setting or service where evidence or insight suggests that there is significant local equality progress or challenge for local communities in the way services are commissioned, procured, designed and delivered
- For all protected groups assess and grade how well services are commissioned, procured, designed and delivered. If needs be, choose specific types of people within each protected group, where key lessons can be learnt and applied

The grading for this outcome is stipulated as:

- **Undeveloped**: People from all protected groups fare poorly compared with people overall OR evidence is not available
- Developing: People from only some protected groups fare as well as people overall
- Achieving: People from most protected groups fare as well as people overall
- Excelling: People from all protected groups fare as well as people overall

### 3 Key Findings

Members are asked to refer to Appendix 1 (Goal 1: Better health Outcomes) and Appendix 2 (Goal 2: Improved patient access and experience) attached to this report.

Below is a summary of the key findings against each outcome, and the rationale for the grading:

#### Goal 1 – Better health Outcomes

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Grading</th>
<th>Rationale for Grading</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1 - Services are commissioned, procured, designed and delivered to</td>
<td>Developing</td>
<td>Current evidence gathered shows that people from some protected groups fare as well as people overall. There needs to be consistency across individual service areas on reporting and evidencing how needs are met across protected characteristics. Such evidence would lead to an 'Achieving' status or above.</td>
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<td>meet the health needs of the local communities.</td>
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<tr>
<td>1.2 – Individual people’s health needs are assessed and met in</td>
<td>Developing</td>
<td>Friends and Family Tests, PALS / Complaints Data, and Community Mental Health Survey data provides some disaggregated information by protected characteristics on satisfaction of care and support. Disaggregation of such data shows that people from some protected groups fare well as people overall.</td>
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<td>appropriate and effective ways.</td>
<td></td>
<td></td>
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<tr>
<td>1.3 – Transitions from one service to another, for people on care</td>
<td>Un-</td>
<td>The Trust does not have robust or efficient systems in place to monitor transitions or care pathways by specific protected characteristics without much manual effort at this time. This will need to be a consideration in the development of the RIO</td>
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<tr>
<td>pathways, are made smoothly with everyone well informed.</td>
<td>developed</td>
<td></td>
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<tr>
<td>1.4 – When people use the NHS services their safety is prioritised</td>
<td>Developing</td>
<td>Annual Incident Report, Service User Incident Data and Complaints / PALS data relating to the ‘Safety’ Domain, provide disaggregated data by some protected characteristics (but not by all). Disaggregation of this data shows that people from some protected groups fare well as people overall.</td>
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<td>and they are free from mistakes, mistreatment and abuse.</td>
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#### Goal 2 – Improved patient access and experience

<table>
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<tr>
<th>Outcome</th>
<th>Grading</th>
<th>Rationale for Grading</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1 – Patients, carers and communities can readily access hospital,</td>
<td>Achieving</td>
<td>Evidence collected includes data from Court Assessment &amp; Referral Services, cost of interpretation / translation PALS complaints data regarding access denied and referral problems, and information on BSL Space. Disaggregation of data shows that people from most protected groups fare as well as people overall</td>
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<tr>
<td>community health or primary care services and should not be denied</td>
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<td>access on unreasonable grounds.</td>
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<tr>
<td>2.2 – Patients are informed and supported to be as involved as they</td>
<td>Achieving</td>
<td>Evidence collected and disaggregation of data by protected characteristics show that people from most groups fare as well as people overall</td>
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<td>wish to be in decisions about their care.</td>
<td></td>
<td></td>
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<tr>
<td>2.3 – People report positive experiences of the NHS.</td>
<td>Achieving</td>
<td>Evidence collected and disaggregation of data by protected characteristics show that people from most groups fare as well as people overall</td>
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<tr>
<td>2.4 – People’s complaints about services are handled</td>
<td>Developing</td>
<td>Data gathered from PALS Report on complaints 2014-15 and Complaints process Survey data 2014-2015 shows disaggregation by gender, ethnicity and age. People from</td>
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4 Learning gained and improvement plan

This has been the most robust assessment so far against EDS2 goals 1 and 2 that the Trust has completed.

Key learning points are:

- The completion of the Goals 1 and 2 provide a strong baseline assessment to develop the Trust’s Service User focused equality related work
- Evidence gathered in relation to the outcomes provides good insight and intelligence in areas where the Trust is performing well in delivering equality outcomes and areas for improvement
- Getting hold of robust internal correlation of evidence across all protected groups remains a challenge in some areas of the EDS2. Evidence disaggregated by age, ethnicity and gender is easier to come by than other protected characteristics such as sexual orientation, marital status, pregnancy / maternity and religion.
- The Trust needs to be conscious of identifying equality related evidence, and also to ensure that such evidence is used for effective ‘equality impact assessments’ of services.

5 Improvement Plan

In order to work towards improving our grading for the future, we need to make any improvement plans manageable and doable.

This means building on the work currently being done to understand the Service User experience, and integrating ways to better develop insight and intelligence regarding experiences between different protected characteristics

Evidently, there is a commitment within services to deliver excellent quality, needs led services that promote recovery. The Trust needs to find efficient and effective ways to measure equality impact through:

- Strengthening service specifications by highlighting what equality outcomes services are likely to deliver
- Ensuring service standards reflect equality outcomes for services
- Using the outcomes under goals 1 and 2 to measure equality outcomes for services (where applicable).

Further work will need to be done to develop an improvement plan with the above three points in mind. In this way, the Trust can strengthen an efficient and co-ordinated approach to progressing towards at least ‘Achieving’ grades where they are currently ‘Developing’, ‘Excellent’ where they are currently ‘Achieving’.

6 Future Focused

In addition to the EDS2, the Trust is required under the Equality Act 201 to publish its Equality Objectives

Our existing Equality Objectives are:

- Improve data capture methods and quality of service user information.
- Embed equality and diversity principles into induction, supervision / appraisal training, and Leadership / management training
- To understand and gain improvements in practise in community treatment orders, detentions under the Mental Health Act, use of restraint, and recruitment and retention
- Ensuring that the Trust's Foundation Trust membership is not only representative of the population we serve, but is over-represented for those with protected characteristics.
- Explore the potential information available as system leader to understand resource utilisation in Bristol and the wider determinants of poor mental health.

Progress against these existing objectives will need to be reviewed. However, these are more akin to actual actions rather than objectives.
Therefore, in considering the assessment outcomes against Goals 1 & 2, which provide a firm baseline from which the Trust can progress from, it makes business sense that we adopt these Goals as our internal focused Equality Objectives from 2016 to 2019, and ensure that annual review of the progress against their outcomes is established. In this way there will be a more streamlined, focused and manageable pathway to delivery service user related equality outcomes.

7 Equality Implications
Equality implications are contained in the body of this report.

8 Recommendations
It is recommended that members:

- Agree and approve the assessment outcomes under Goals 1 & 2 on the evidence presented
- Agree and approve Goals 1 & 2 as the Trust’s Equality Objectives for 2016 – 2019