EDS 2022 full report

Meeting	Board of Directors		
Date	19/04/2023	**Agenda Item**	19
Lead Director	Paula Simpson, Chief Nurse		
Author(s)	Neil Perris, Head of Inclusion and Health Equalities		

Action required (please select the appropriate box)

To Approve ☒	To Discuss ☐	To Assure ☐

Purpose

The members of the Board are asked to receive the final and full report from the EDS assessment for 2022 and provide approval for the necessary documents to be published on the Trust's website.

Executive Summary

The EDS is an improvement tool for patients, staff and leaders of the NHS. It supports NHS organisations in England - in active conversations with patients, public, staff, staff networks, community groups and trade unions - to review and develop their approach in addressing health inequalities through three domains: Services, Workforce and Leadership. It is driven by data, evidence, engagement and insight.

Implementation of the Equality Delivery System (EDS) is a requirement on both NHS commissioners and NHS providers.

2022 was a pilot year for a new version of the EDS framework. The third version of the EDS was commissioned by NHS England and NHS Improvement with, and on behalf of, the NHS, supported by the NHS Equality and Diversity Council (EDC). It is a simplified and easier-to-use version of EDS2.

As it was a pilot year, and in recognition of the impact of the Covid pandemic and recovery on the delivery of EDS for the previous two years, a number of adjustments were made to delivery for the 2022/23 financial year. The most significant of these was the requirement to select just two services to review in Domain 1 rather than the 3 expected for future years. Of these two, one was expected to fit under the 5 clinical priorities cited in the Core20Plus5 and the second was suggested to be a smaller less complex service.

WCHC selected Community Cardiology and the Adult and Children's Bladder & Bowel Service.

Guidance recommended that for Domain 1 we should work collaboratively across the health & social care system to assess and understand our performance as individual trusts and as a system. To this end, C&M ICB worked across all Trusts and stakeholders to undertake assessment events with all partners across each of the Core20Plus5 clinical priority pathways.

Our services were reviewed at the Hypertension & Respiratory Grading Meeting on 17th January 2023 which included the following stakeholders:

- Bridgewater Community Health NHS FT
- East Cheshire NHS Trust
- Liverpool Heart and Chest Hospital NHS FT
- Liverpool University Hospital NHS FT
- Liverpool Womens Hospital NHS FT
- Mersey Care NHS
- Mid Cheshire NHS Trust
- Southport and Ormskirk Hospital NHS Trust
- Warrington and Halton Hospitals NHS FT
- Wirral Community Health and Care NHS FT
- Wirral University Teaching Hospital NHS Trust
- Cheshire & Merseyside ICB
- Place Commissioners, including Wirral
- Healthwatch, including Healthwatch Wirral

Service Review Templates were completed for both services compiling the evidence and circulated to the grading group ahead of the meeting. The services presented a summary of their evidence and took questions to enable a robust evaluation.

Domain 2 (workforce wellbeing) evidence was gathered by the Head of HR (Wellbeing & Engagement) and Head of inclusion & health inequalities against the 4 outcome measures. This evidence included data and insight from a range of sources including staff network and staff survey alongside more direct evidence of workforce wellbeing activity.

Domain 3 (inclusive Leadership) evidence was led by the Director of Corporate Affairs supported by the Head of Corporate Governance and the grading was additionally supported by the Head of HR (Wellbeing & Engagement) and the Head of Inclusion & Health Inequalities.

The members of the Board are asked to receive the reports as follows and provide approval to publish in order to comply with ICB requirements.

- EDS 2022 full report (appendix 1)
- EDS 2022 summary report accessible version (appendix 2)

An action plan has been developed to support further implementation of identified objectives.

Risks and opportunities:

Any identified risks are addressed through the associated action plans. The Board Assurance Framework includes strategic risks ID01 – Failure to deliver services safely and responsively to inclusively meet the needs of the population and ID08 - Our People Inclusion intentions are not delivered; people are not able to thrive as employees of our Trust and the workforce is not representative of our population; both of which record and monitor mitigations and relevant gaps and actions in relation to the domains in the EDS.

Quality/inclusion considerations:

Quality & Equality Impact Assessment completed and attached No.

Not applicable for the report but any relevant QEIAs are completed for individual projects or programmes of work.

Financial/resource implications:

Not applicable.

The Trust Vision – To be a population health focused organisation specialising in supporting people to live independent and healthy lives. The Trust Objectives are:

- Populations – We will support our populations to thrive by optimising wellbeing and independence
- People – We will support our people to create a place they are proud and excited to work
- Place - We will deliver sustainable health and care services within our communities enabling the creation of healthy places

Please select the top three Trust Strategic Objectives and underpinning goals that this report relates to, from the drop-down boxes below.

Populations - Safe care and support every time	People - Better employee experience to attract and retain talent	Populations - People and communities guiding care

The Trust Social Value Intentions

Does this report align with the Trust social value intentions? Yes.

If Yes, please select all of the social value themes that apply:

Community engagement and support ☒

Purchasing and investing locally for social benefit ☐

Representative workforce and access to quality work ☒

Increasing wellbeing and health equity ⊠
Reducing environmental impact ☐

Board of Directors is asked to consider the following action
The members of the board are asked to receive the full and final report and approve publication on the Trust's website.

Report history (Please include history of where the paper has been presented prior to reaching this meeting, including the title of the meeting, the date, and a summary of the outcome)

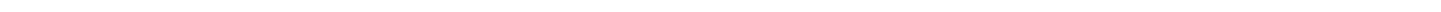| Submitted to	Date	Brief summary of outcome
No previous formal reporting history but briefing at informal board in November 2022.		

NHS Equality Delivery System 2022

Wirral Community Health and Care NHS Foundation Trust EDS Report 2022

Version 1, 15 August 2022

Contents

Equality Delivery System for the NHS

The EDS Reporting Template

Implementation of the Equality Delivery System (EDS) is a requirement on both NHS commissioners and NHS providers. Organisations are encouraged to follow the implementation of EDS in accordance EDS guidance documents. The documents can be found at: www.england.nhs.uk/about/equality/equality-hub/patient-equalities-programme/equality-frameworks-and-information-standards/eds/

The EDS is an improvement tool for patients, staff and leaders of the NHS. It supports NHS organisations in England - in active conversations with patients, public, staff, staff networks, community groups and trade unions - to review and develop their approach in addressing health inequalities through three domains: Services, Workforce and Leadership. It is driven by data, evidence, engagement and insight.

The EDS Report is a template which is designed to give an overview of the organisation's most recent EDS implementation and grade. Once completed, the report should be submitted via england.eandhi@nhs.net and published on the organisation's website.

NHS Equality Delivery System (EDS)

Name of Organisation	Wirral Community Health & Care NHS Foundation Trust	Organisation Board Sponsor/Lead
		Paula Simpson
Name of Integrated Care System	Cheshire & Merseyside ICB	

EDS Lead	Neil Perris, Head of Inclusion & Health Equity		At what level has this been completed?	
				*List organisations
EDS engagement date(s)	17.01.2023		Individual organisation	
			Partnership* (two or more organisations)	
			Integrated Care System-wide*	Bridgewater Community Health NHS FT East Cheshire NHS Trust Liverpool Heart and Chest Hospital NHS FT Liverpool University Hospital NHS FT Liverpool Womens Hospital NHS FT Mersey Care NHS Mid Cheshire NHS Trust

				Southport and Ormskirk Hospital NHS Trust Warrington and Halton Hospitals NHS FT Wirral Community Health and Care NHS FT Wirral University Teaching Hospital NHS Trust

Date completed	23.02.23	**Month and year published**	Feb/March 2023
Date authorised		**Revision date**	

Completed actions from previous year	
Action/activity	**Related equality objectives**
This is a new version of EDS	Inclusion Strategy 2022-2027 - Wirral
The Inclusion and Health Inequalities Strategy 2022-27 was developed following completion of the last version of EDS and is available on the trust's website.	Community Health and Care NHS Foundation Trust (wchc.nhs.uk)

EDS Rating and Score Card

Please refer to the Rating and Score Card supporting guidance document before you start to score. The Rating and Score Card supporting guidance document has a full explanation of the new rating procedure, and can assist you and those you are engaging with to ensure rating is done correctly

Score each outcome. Add the scores of all outcomes together. This will provide you with your overall score, or your EDS Organisation Rating. Ratings in accordance to scores are below

Undeveloped activity – **organisations score out of 0** for each outcome	Those who score **under 8,** adding all outcome scores in all domains, are rated **Undeveloped**
Developing activity – **organisations score out of 1** for each outcome	Those who score **between 8 and 21,** adding all outcome scores in all domains, are rated **Developing**
Achieving activity – **organisations score out of 2** for each outcome	Those who score **between 22 and 32,** adding all outcome scores in all domains, are rated **Achieving**
Excelling activity – **organisations score out of 3** for each outcome	Those who score **33,** adding all outcome scores in all domains, are rated **Excelling**

Domain 1: Commissioned or provided services

Domain	Outcome	Evidence	Rating	Owner (Dept/Lead)
	1A: Patients (service users) have required levels of access to the service	**Community Cardia Rehab** ICS Service Line Review template completed assessing accessibility against all protected characteristics including data from AIS/Inclusion template **Bladder & Bowel (Adults & Pead's)** Geographical mapping of referrals matching levels of deprivation (IMD). Access examined and examples of improvements/adjustments for each protected characteristic given	2 2 **Overall 2**	Neil Perris – Head of Inclusion & Health Equity /Nicola Williams – Service Lead Neil Perris - Head of Inclusion & Health Equity /Janice Evans - Service Lead
	1B: Individual patients (service users) health needs are met	**Community Cardia Rehab** Evidence of range of services with adjustments and differing access options. Evidence of personalisation of care. **Bladder & Bowel (Adults & Pead's)** Use of AIS/Inclusion template highlighted and reasonable adjustments recorded and implemented. Inclusion improvement programmes e.g Rainbow Pin Badge.	2 2 **Overall 2**	Neil Perris – Head of Inclusion & Health Equity /Nicola Williams – Service Lead Neil Perris - Head of Inclusion & Health Equity /Janice Evans - Service Lead

	1C: When patients (service users) use the service, they are free from harm	**Community Cardia Rehab** Summary of relevant governance, health & safety info, incident and risk management procedures, psychological safety and leadership	3	Neil Perris – Head of Inclusion & Health Equity /Nicola Williams – Service Lead
		Bladder & Bowel (Adults & Pead's) Summary of relevant governance, health & safety info, incident and risk management procedures, psychological safety, and leadership	2 **Overall 3**	Neil Perris - Head of Inclusion & Health Equity /Janice Evans - Service Lead
	1D: Patients (service users) report positive experiences of the service	**Community Cardia Rehab** 95.6% Positive FFT feedback Patient quotes	2	Neil Perris – Head of Inclusion & Health Equity /Nicola Williams – Service Lead
		Bladder & Bowel (Adults & Pead's) FFT scores and positive experience quotes highlighting adjustments and personalisation of care from service users	2 **Overall 2**	Neil Perris - Head of Inclusion & Health Equity /Janice Evans - Service Lead
Domain 1: Commissioned or provided services overall rating			**Achieving (9)**	

Domain 2: Workforce health and well-being

Domain	Outcome	Evidence	Rating	Owner (Dept/Lead)
	2A: When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions	The organisation targets reading materials about the mentioned health conditions to staff about the mentioned conditions. The organisation promotes work-life balance. The organisation signposts to national support	2	Emma Ashley – Head of HR
	2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source	Zero tolerance in place when issues of abuse from patients/ visitors towards staff The organisation penalises staff found to have bullied and harassed others Encouraged FTSU champions with protected characteristics	2	Emma Ashley – Head of HR
	2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source	Referral process to OH Supporting Mental Wellbeing policy WRAP plans and stress risk assessment Staff networks embedded FTSU process embedded with over 100 Champions	2	Emma Ashley – Head of HR
	2D: Staff recommend the organisation as a place to work and receive treatment	from Staff Survey 2021 – 55% recommend place to work 73% recommend treatment	1	Emma Ashley – Head of HR
Domain 2: Workforce health and well-being overall rating			**Achieving (7)**	

Domain 3: Inclusive leadership

Domain	Outcome	Evidence	Rating	Owner (Dept/Lead)
	3A: Board members, system leaders (Band 9 and VSM) and those with line management responsibilities routinely demonstrate their understanding of, and commitment to, equality and health inequalities	CNO lead for health inequalities and non-exec on national reference groups. Health inequalities and inclusion on the Terms of reference for Quality & Safety committee and People & Culture Committee. 'Journey of care' for patients accessing our services/ staff stories at each board meeting. Exec sponsors for each staff network. Celebrating Black History Month, LGBT+ History Month and working with HIVE community involvement. Social Value and Prevention pledge Strategic risk on BAF	2	Paula Simpson – Chief Nurse
	3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed	Equality and Quality Impact Assessment (EQIA) process fully embedded. Every paper considered at board/committee meeting requires evidence of impact on inclusion. Strategic Risk on BAF	2	Paula Simpson – Chief Nurse

3C: Board members and system leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff and patients	The board and committees are being aware of, understanding and monitoring the tools Year on year tracking and monitoring of WRES, WDES, EDS, AIS, Gender Pay Gap. Strategic Risk on BAF. Board receives 6 monthly report on delivery progress of Inclusion & Health Inequalities strategy delivery	2	Paula Simpson – Chief Nurse

Domain 3: Inclusive leadership overall rating	**Achieving (6)**	

Third-party involvement in Domain 3 rating and review	
Trade Union Rep(s): Diane Moore - RCN	**Independent Evaluator(s)/Peer Reviewer(s):**

EDS Organisation Rating (overall rating): Achieving (22)
Organisation name(s): Wirral Community Health & Care NHS Foundation Trust
Those who score **under 8,** adding all outcome scores in all domains, are rated **Undeveloped** Those who score **between 8 and 21,** adding all outcome scores in all domains, are rated **Developing** Those who score **between 22 and 32,** adding all outcome scores in all domains, are rated **Achieving** Those who score **33,** adding all outcome scores in all domains, are rated **Excelling**

EDS Action Plan	
EDS Lead	**Year(s) active**
Neil Perris	2023/24
EDS Sponsor	**Authorisation date**
Paula Simpson	8/03/23

Domain	Outcome	Objective	Action	Completion date
1	1A: Patients (service users) have required levels of access to the service	Bladder & Bowel service to improve engagement with key stakeholder organizations representing underserved or vulnerable to ensure and inclusion needs are addressed	Engage organisation who work with vulnerable groups to include Age concern, Tomorrow Women Wirral, Wirral Multicultural Organisation via the Inclusion & Partnership Forum	June 23
		Bladder & Bowel service to review our communications on public facing website.	Review and update website content	June 23
	1B: Individual patients (service users) health needs are met	Ensure the specific needs of homeless people are understood and addressed	Engage with Homelessness liaison nurse (CWP)	June 23
		Ensure the specific needs of women exiting criminal justice system are understood and addressed	Engage with Tomorrows Women Wirral	June 23
	1C: When patients (service users) use the service, they are free from harm			
	1D: Patients (service users) report positive experiences of the service			

Domain	Outcome	Objective	Action	Completion date
	2A: When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions	Improving health literacy amongst the workforce	Continue to promote campaigns in relation to the 5 health conditions targeted at the workforce Promote work life balance, healthy lifestyles and opportunity to exercise Support the use of Health & Wellbeing conversation ensuring all managers are equipped to support individualised needs amongst the workforce	March 24
	2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source			
	2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source			

2D: Staff recommend the organisation as a place to work and receive treatment	70% staff recommend us as a place to work and recommend our care to family & friends	Increase our Exit interview uptake to be able to compare experiences of staff with protected characteristics	March 24

Domain	Outcome	Objective	Action	Completion date
	3A: Board members, system leaders (Band 9 and VSM) and those with line management responsibilities routinely demonstrate their understanding of, and commitment to, equality and health inequalities	Board members routinely enable underserved voices to be heard	Develop & deliver a revised reciprocal mentoring scheme to engage senior leaders with staff members with protected characteristics	March 24
	3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed			
	3C: Board members and system leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff and patients	Ensure levers are in place to manage performance and monitor progress with staff and patients	Continue to develop the Inclusion dashboard and embed scrutiny at divisional SOG meetings	March 24

Patient Equality Team
NHS England and NHS Improvement
england.eandhi@nhs.net

Wirral Community Health & Care NHS Foundation Trust

Equality Delivery System 2022

Scoring

Each outcome is to be scored based on the evidence provided. Once each outcome has a score, they are added together to gain domain ratings. Domain scores are then added together to provide the overall score, or the EDS Organisation Rating. Ratings in accordance to scores are below The scoring system allows organisations to identify gaps and areas requiring action

Undeveloped activity – organisations score 0 for each outcome	Those who score **under 8**, adding all outcome scores in all domains, are rated **Undeveloped**
Developing activity – organisations score 1 for each outcome	Those who score **between 8 and 21**, adding all outcome scores in all domains, are rated **Developing**
Achieving activity – organisations score 2 for each outcome	Those who score between **22 and 32**, adding all outcome scores in all domains, are rated **Achieving**
Excelling activity – organisations score 3 for each outcome	Those who score **33**, adding all outcome scores in all domains, are rated **Excelling**

EDS 2022 assessment programme and results

The Trust held 3 assessment events on:

- January 2023 for EDS Domain 1
- February 2022 for EDS Domain 2
- February 2022 for EDS Domain 3

The Trust scored a combination of

This score rated the Trust overall the EDS 2022, as Achieving

Individual scores, domain ratings and assessor recommended EDS 2022 actions, follow in this report.

Equality Delivery System (EDS) – Summary Results for Wirral Community Health & Care NHS Foundation Trust, January 2022.

Our 2022 submission was assessed by internal and external stakeholders

Domain 1: Commissioned or provided services
Community Cardiac Rehabilitation & Bladder & Bowel Services – Best scores

Outcome		Undeveloped	Developing	Achieving	Excelling
1A.	Patients (service users) have required levels of access to the service			✔	
1B.	Individual patients (service user's) health needs are met			✔	
1C.	When patients (service users) use the service, they are free from harm				✔
1D.	Patients (service users) report positive experiences of the service			✔	

Completed Service Review templates with detailed evidence are available on request

Domain 1: Commissioned or provided services actions

- Continue to improve completion rates of our AIS and Inclusion Information template which collects data on all protected characteristics and on marginalised groups identified in the Core20Plus5 e.g., deprived areas representing health inequalities
- Continue to develop the Inclusion & Partnership forum and support service to engage with community stakeholder groups to identify further improvement actions to remove barriers and tackle inequalities. To include Age concern, Tomorrows Women Wirral, Wirral Multicultural Organisation and the Homeless hotels and Liaison Nurse
- Review the Bladder & Bowel service entry on the Trusts public facing website to ensure its clear, accessible, and inclusive
- Deliver a Cardiac Rehab equality development session in 2023 to include local stakeholder groups to support development of service improvement plan

Domain 2: Workforce Health and Wellbeing

Outcome	Undeveloped	Developing	Achieving	Excelling
2A When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions			✔	
2B When at work, staff are free from abuse, harassment, bullying and physical violence from any source			✔	
2C Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source			✔	
2D Staff recommend the organisation as a place to work and receive treatment		✔		

Domain 2: Workforce actions

- Continue to promote campaigns in relation to the 5 health conditions targeted at the workforce

- Promote work life balance, healthy lifestyles and opportunity to exercise

- Support the use of Health & Wellbeing conversation ensuring all managers are equipped to support individualised needs amongst the workforce

- Increase our Exit interview uptake to be able to compare experiences of staff with protected characteristics

Domain 3: Inclusive Leadership

Outcome	Undeveloped	Developing	Achieving	Excelling
3A Board members, system leaders (Band 9 and VSM) and those with line management responsibilities routinely demonstrate their understanding of, and commitment to, equality and health inequalities			✔	
3B Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed			✔	
3C Board members, system and senior leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff and patients			✔	

Domain 3: Inclusive Leadership actions

- Develop & deliver a revised reciprocal mentoring scheme to engage senior leaders with staff members with protected characteristics

- Continue to develop the Inclusion dashboard and embed scrutiny at divisional SOG meetings