**Classification: Official** 

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# NHS Equality Delivery System 2022 EDS Reporting Template Domain One

Version 1, 15 August 2022



Equality Delivery System for the NHS......2

### 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: <u>www.england.nhs.uk/about/equality/equality-hub/patient-equalities-programme/equality-frameworks-andinformation-standards/eds/</u>

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 <u>england.eandhi@nhs.net</u> and published on the organisation's website.

# NHS Equality Delivery System (EDS)

Name of Organisation		NHS Cheshire and Merseyside	Organisation Board Sponsor/Lead		
			Clare Watson (CW), Assistant Chief Executive Christina Samosa (CS), Chief People Officer		ssistant Chief
Name of Integrated Care System		Cheshire and Merseyside			), Chief People

EDS Lead	Jo Roberts (JR), Acc Andy Woods (AW), S Manager	At what level has this been completed?		
			*List organisations	
EDS engagement date(s)	17 <sup>th</sup> January 2023 24 <sup>th</sup> January 2023 26 <sup>th</sup> January 2023 30 <sup>th</sup> January 2023 31 <sup>st</sup> January 2023	Individual organisation	Not applicable.	
		Partnership* (two or more organisations)	Not applicable	
		Integrated Care System-wide*	NHS Cheshire and Merseyside Bridgewater Community Health NHS FT East Cheshire NHS Trust	

	Liverpool Heart and Chest Hospital NHS FT Liverpool University Hospitals NHS FT Liverpool Women's Hospital NHS FT Mersey Care NHS FT Mid Cheshire NHS Trust Southport and Ormskirk Hospitals NHS Trust Warrington and Halton Hospitals NHS FT Wirral Community Health and Care NHS FT Wirral University Teaching Hospital NHS FT
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Date completed	6 <sup>th</sup> of February 2023	Month and year published	February 2023
Date authorised	23 <sup>rd</sup> of February 2023	Revision date	February 2024

Completed actions from previous year						
Action/activity	Related equality objectives					
First year of completing EDS as an Integrated Care Board.	Not applicable					
Activity to support the organisation to meets it requirements under the Equality Act 2010 is outlined in the NHS Cheshire & Merseyside's Annual Equality Report for 2022/23.						

### EDS Rating and Score Card

Ratings in accordance to scores are below	
Undeveloped activity – organisations score out of 0 for each outcome	Those who score <b>under 8</b> , adding all outcome scores in all domains, are rated <b>Undeveloped</b>
Developing activity – organisations score out of 1 for each outcome	Those who score <b>between 8 and 21</b> , adding all outcome scores in all domains, are rated <b>Developing</b>
Achieving activity – organisations score out of 2 for each outcome	Those who score <b>between 22 and 32</b> , adding all outcome scores in all domains, are rated <b>Achieving</b>
Excelling activity – organisations score out of 3 for each outcome	Those who score <b>33</b> , adding all outcome scores in all domains, are rated <b>Excelling.</b>

NHS Cheshire and Merseyside (CMICB) and the following eleven trusts opted for early implementation of EDS 2022. For domain 1, CMICB's equality and inclusion leads asked each trust equality / patient experience lead to liaise with executive colleagues of their respective organisation to identify two services to review, one of which had to be a clinical area part of Core20Plus5. Trusts selected the following services. Note that some trusts selected two services part of Core20Plus5.

**Bridgewater Community Health NHS FT**: Halton Health Visiting Service and Warrington Family Nurse Partnership (Core20Plus5 Maternity)

East Cheshire NHS Trust: Antenatal Screening (Core20Plus5 Maternity) and Acute Paediatrics

Liverpool Heart and Chest Hospital NHS FT: Targeted Healthy Lung Check Service (Core20Plus5 Respiratory) and Hypertension Case Finding (Core20Plus5)

Liverpool University Hospitals NHS FT: Cardiology, (Core20Plus5 Hypertension Case Finding) and Respiratory (Core20Plus5 Respiratory)

Liverpool Women's Hospital NHS FT: Induction of Labour (Core20Plus5 Maternity) and Early Cervical Cancer (Core20Plus5 Cancer) Mersey Care NHS FT: High Secure Services (Core20Plus5 Severe Mental Illness)

NB Mersey Care had planned to review Silver Birch Hubs Peri-natal mental health service as their second service however due to organisational pressures could not complete the review.

Mid Cheshire NHS Trust: Maternity (Core20Plus5 Maternity) and Ophthalmology

Southport and Ormskirk Hospitals NHS Trust: TIA (Core20Plus5 Hypertension Case Finding) and Patient Initiated Follow Ups (PIFU) in MSK

Warrington and Halton Hospitals NHS FT: Team River -Warrington and Team Sunlight – Halton (Core20Plus5 Maternity) and Long COVID service

Wirral Community Health and Care NHS FT: Community Cardiology CVD Rehabilitation (Core20Plus5 Hypertension Case Finding) and Bladder and Bowel

Wirral University Teaching Hospital NHS FT: Maternity (Core20Plus5 Maternity), Perinatal Mental Health (Core20Plus5 Maternity)

CMICB's equality and inclusion leads developed a service review template for organisations to adapt and complete for each service review. Organisations could then use this document to consider information available relating to patient access, meeting health needs, experience and outcomes, identify any gaps in intelligence, to help inform ratings against each outcome, and to develop service improvement plans. A list of data sources and publications were also provided to trusts for each of the Core20Plus5 clinical areas.

CMICB's equality and inclusion leads facilitated a series of meetings for each of the Core20Plus5 clinical areas with trusts, Healthwatch and lead 'place' commissioning managers in attendance. Other stakeholders were also invited, such as Improving Me colleagues to the Maternity specific meetings and advocacy service to the Severe Mental Illness discussions. Contact was also made with CHAMPS and cancer alliance colleagues.

The approach to engagement with stakeholders was varied. Some trusts had access to well established internal patient experience groups, established links with Healthwatch and VCSE organisations and therefore were more easily able to engage with them throughout the process to scrutinise the available evidence, respond to any clarifying questions, discuss and collectively agree ratings prior to presenting those stakeholder approved ratings to trust peers reviewing the same clinical service. Other trusts however didn't have access to such groups; either due to them not being as well established or due to time constraints with undertaking the reviews whilst managing internal organisational pressures. These trusts therefore utilised dedicated grading meetings, facilitated by the CMICB equality and inclusion leads with Healthwatch, commissioning managers and trust peers in attendance for that forum to scrutinise the available evidence to ultimately agree/ disagree with proposed ratings. Grading meetings in both respects were delivered in a similar format; trusts delivering a presentation highlighting the available evidence, gaps in intelligence with the service review template/ supporting data available as a supporting document. Ratings were determined in accordance with the EDS 2022 score care and ratings guidance.<sup>1</sup>

NHS C&M ratings for domain 1 is Achieving across each outcome. This is the **mode** rating, as taken from the trust's individual service review ratings below:

Trust	Service Review	1A: Service users have required levels of access to the service	1B: Individual service user's health needs are met	1C: When service users use the service, they are free from harm	1D: Service users report positive experiences of the service
Bridgewater Community Health NHS FT	Halton Health Visiting Service (Core20Plus5 Maternity)	Developing	Achieving	Achieving	Achieving
	Warrington Family Nurse Partnership (Core20Plus5 Maternity)	Developing	Achieving	Achieving	Achieving
East Cheshire NHS Trust	Antenatal Screening (Core20Plus5 Maternity)	Achieving	Achieving	Excelling	Achieving

<sup>1</sup> EDS Ratings and Score Card Guidance (england.nhs.uk)

	Acute Paediatrics	Achieving	Achieving	Achieving	Achieving
Liverpool Heart and Chest Hospital NHS FT	Targeted Healthy Lung Check Service (Core20Plus5 Respiratory)	Achieving	Achieving	To be confirmed following internally committee discussion.	To be confirmed following internally committee discussion.
	Hypertension Case Finding (Core20Plus5)	Achieving	Achieving	Achieving	To be confirmed following internally committee discussion.
Liverpool University Hospital NHS FT	Cardiology (Core20Plus5 Hypertension Case Finding)	Developing	Developing	Developing	Developing
	Respiratory (Core20Plus5)	Developing	Developing	Developing	Developing
Liverpool Women's Hospital NHS FT	Induction of Labour (Core20Plus5 Maternity)	Developing	Achieving	Achieving	Developing
	Early Cervical Cancer (Core20Plus5 Cancer)	Developing	Developing	Developing	Developing
Mersey Care NHS	High Secure Services (Core20Plus5 Severe Mental Illness)	Achieving	Achieving	Excelling	Developing
Mid Cheshire NHS Trust	Maternity (Core20Plus5 Maternity)	Achieving	Excelling	Excelling	Achieving
	Ophthalmology	Developing	Achieving	Achieving	Developing

Southport and Ormskirk Hospital NHS Trust	TIA (Core20Plus5 Hypertension Case Finding)	Developing	Developing	Achieving	Undeveloped
	Patient Initiated Follow Ups (PIFU) in MSK	Achieving	Achieving	Achieving	Achieving
Warrington and Halton Hospitals NHS FT	Team River - Warrington and Team Sunlight – Halton (Core20Plus5 Maternity)	Developing	Achieving	Achieving	Achieving
	Long COVID service	Developing	Excelling	Achieving	Achieving
Wirral Community Health and Care NHS FT	Community Cardiology CVD Rehabilitation (Core20Plus5 Hypertension Case Finding)	Achieving	Achieving	Excelling	Achieving
	Bladder and Bowel	Achieving	Achieving	Achieving	Achieving
Wirral University Teaching Hospital NHS Trust	Maternity (Core20Plus5 Maternity)	Achieving	Achieving	Achieving	Achieving
	Perinatal Mental Health (Core20Plus5 Maternity)	Achieving	Developing	Developing	Achieving

Domain	Outcome	Evidence	Rating	Owner (Dept/Lead)
Domain 1: Commissioned or provided services	1A: Patients (service users) have required levels of access to the service	The service review template included information on barriers for people with protected characteristics and other health inclusion groups so that trusts could consider these as part of their review. Depending on the type of service, services were able to consider for example if conditions were more prevalent relevant to a protected characteristic. Each of the service reviews considered the population served, geographical location of services including domiciliary provision, hours of operation, staffing and a range of other factors. Services have implemented the accessible information standard. Services were able to identify any gaps in data relevant to protected characteristics or other health inclusion groups and identify actions for improvement.	2	CW/ AW

## Domain 1: Commissioned or provided services

	Community based services were able to evidence how they have triangulated referral rates with patient experience and health inequalities information to adapt their services. Examples include using intelligence to inform the geographical location of community clinics.		
1B: Individual patients (service users) health needs are met	Each of the reviews considered service activity information by protected characteristic and other health inclusion groups, considerations also included waiting times and longest wait information (where relevant to the service). Services considered information relating to non-attendance at appointments (where appropriate for elective services). Services considered patient experience information where this was available and intelligence from local Healthwatch colleagues. All services have access to interpretation services for patients who use British Sign Language and for patients whose first language isn't English. Services were able to provide examples of Reasonable Adjustments they have provided.	2	CW/AW

1C: When patients (service users) use the service, they are free from harm	Service reviews indicated that all organisations have procedures/initiatives in place to enhance safety in services for patients. Positive incident reporting cultures reported and examples of learning from incidents. Services which had significant waiting lists and/or long waiters evidenced that clinical triage took place. Freedom to Speak up guardians available. Staffing resource, vacancies considered as part of the reviews. Trusts identified further actions in relation to considering protected characteristics in serious incident reviews and collecting equality monitoring information for complaints monitoring.	2	CW / AW
1D: Patients (service users) report positive experiences of the service	All trusts collate data from patients with protected characteristics about their experience of the service and provide regular reporting to identify themes / actions. The reviews highlighted that trusts use patient experience data to influence service delivery.	2	CW/ AW

Domain 1: Commissioned or provided services overall rating	8	Achieving
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# EDS Organisation Rating (overall rating): Developing Organisation name(s): NHS Cheshire and Merseyside 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				
Year(s) active				
23/02/2023 to 28/02/2024				
Authorisation date				
February 2023.				

Domain	Outcome	Objective	Action	Completion date
oned or ss	1A: Patients (service users) have required levels of access to the service	Work collaboratively with providers and other partners to identify and recommend actions to address health inequalities	Review Patient Equality Focused Forum (PEFF) membership	May 2023
Domain 1: Commissioned provided services		and barriers in accessing healthcare services across Cheshire and Merseyside to improve patient journey and experience.	Facilitate workshop/ event for trusts to share their service review findings and learning with all trusts and wider system colleagues.	Trusts: April 2023 Wider system: May 2023
			ICB Board sub-committees to support identification of services to be reviewed in 2023/24	March 2023

1B: Individual patients (service users) health needs are met	Patient Equality Focused Forum works collaboratively to develop and implement best practice.	PEFF workplan to be developed.	July 2023
1C: When patients (service users) use the service, they are free from harm	Equality considerations are embedded in SI process.	Tailored training for SI panel members/ Quality and Performance Committee members.	October 2023
1D: Patients (service users) report positive experiences of the service	Equality monitoring information incorporated into patient experience reporting.	Implement any recommended actions specific to EDI following the ICB's governance review.	December 2023
	The ICB creates evidence-based action plans in collaboration with patients and relevant stakeholders, and monitors progress.	Consider Citizens Panel representatives for inclusion in PEFF membership.	May 2023

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