

Equality Delivery System 2014



Bridgewater

Healthcare at the heart
of your community

Bridgewater and the Equality Delivery System

Introduction

The NHS Equality Delivery System (EDS) was launched in November 2011, and Bridgewater completed its first grading in summer 2012. Bridgewater was formed in April 2011, and came together as four provider arms that had existed as part of former Primary Care Trust's (PCT's). Each of those PCT's had been using the Equality Performance Improvement Toolkit (EPIT) - the NW precursor to EDS – and therefore each had a different legacy and performance level against equality outcomes.

Since Bridgewater's formation, a vast amount of work has been undertaken to understand what the equality issues are across our geographical footprint and how each division was dealing with those issues before the formation of the Trust.

When completing the 2012 EDS evidence, we were in a position of defining our approach to equality on a geographical divisional basis – we cover a large geographical footprint and our Commissioners and those partners grading our performance have different requirements in the different boroughs. This was a really useful learning experience for us as a Trust, and scrutiny on our equality performance from so many different partners has only helped to serve and inform our approach in following years. Our 2012 evidence against EDS was graded as developing across all outcomes.

In 2013 our grading for Goals 1, 2 and 4 remained at developing, though there had been significant progress against each outcome we were unable to provide evidence against more than three or four protected characteristics on a consistent basis. Goal 3 however was graded as achieving - this reflected the work that had concentrated on ensuring that our workforce policies, processes and procedures reflected the One Bridgewater approach.

In 2014 we believe the agreed grading against all four goals should remain the same as in 2013 - we continue to develop work streams that support the health inequalities and inclusion agenda but are still constrained by the inability to provide quantifiable evidence against more protected characteristic groups.

This document identifies the agreed 2014 grade against each goal and outcome. There is also an explanation for each goal of the key issues that we are currently focussing on. This is further supported by our Public Sector Equality Duty (PSED) Compliance Report, updated and published in January of every year and our Equality Objectives Action Plan, also reviewed and updated on a yearly basis. These documents can be found at <http://www.bridgewater.nhs.uk/aboutus/equalitydiversity/equalityact2010/>.

If you wish to see any more detail on our EDS grading or any other equality initiatives we are working on, then please do not hesitate to contact us on the details given at the end of this document.

Equality Delivery System – Grading 2014 Goals 1 and 2

Goal 1 – Better Health Outcomes for All	
Outcomes	Grade
Services are commissioned, designed and procured to meet the health needs of local communities, promote well-being and reduce health inequalities.	Developing
Individual patients' health needs are assessed, and resulting services provided, in appropriate and effective ways.	Developing
Changes across services for individual patients are discussed with them, and transitions are made smoothly.	Developing
The safety of patients is prioritised and assured, in particular, patients are free from abuse, harassment, bullying, violence from other patients and staff, redress being open and fair to all	Developing
Public Health, vaccination and screening programmes reach and benefit all local communities and groups	Developing

Goal 2 – Improved Patient Access and Experience	
Outcomes	Grade
Patients, carers and communities can readily access services, and should not be denied access on unreasonable grounds	Developing
Patients are informed and supported to be as involved as they wish to be in their diagnosis and decisions about their care, and to exercise choice about treatments and places of treatment	Developing
Patients and carers report positive experiences of their treatment and care outcomes and of being listened to and respected and of how their privacy and dignity is prioritised	Developing
Patients' and carers' complaints about services, and subsequent claims for redress, should be handled respectfully and efficiently	Developing

Our work on goals 1 and 2 continues to be slowed by our inability to routinely measure more than three or four protected characteristics in every service for each visit/presentation. There are a number of reasons for this, and they were highlighted in detail in 2012's submission - in summary they include issues such as the number of differing IT systems and paper based processes used in a community setting. We are addressing this in a number of ways:

- Use of the Census 2011 and other national data/estimates such as that provided by IHAL, RNIB and Action on Hearing Loss to identify who the protected and vulnerable groups are within our local populations. We then use this information to source evidence from local, regional and national organisations to identify what barriers and issues we need to consider for these groups.

- Use of equality analysis forms (EqA) for all services that works on the CQC social model of equality – access; attitudes & behaviours and assistance. This has allowed us to identify actions to remove barriers and improve access in services and in the Trust as a whole for those who may face difficulties when contacting or using a service. For more information including all our service equality analyses go to: <http://www.bridgewater.nhs.uk/aboutus/equalitydiversity/equalityanalysis/>.
- Movement of all our services to System One IT – this is an on-going project across all our services. This will allow us to routinely collect information and analyse our patient access by protected groups. The equalities team is working with the IT team to ensure protected characteristic data is collected routinely.

The full detail of the actions we are taking in relation to EDS Goals 1 and 2 can be found in our Equality Objectives Summary.

Equality Delivery System – Grading 2014 Goal 3

Goal 3 – Empowered, Engaged and Well Supported Staff	
Outcomes	Grade
Recruitment and selection processes are fair, inclusive and transparent so that the workforce becomes as diverse as it can be within all occupations and grades	Achieving
Levels of pay and related terms and conditions are fairly determined for all posts, with staff doing equal work and work rated as of equal value being entitled to equal pay	Achieving
Through support, training, personal development and performance appraisal, staff are confident and competent to do their work, so that services are commissioned or provided appropriately	Achieving
Staff are free from abuse, harassment, bullying and violence from both patients and their relatives and colleagues, with redress being open and fair to all	Achieving
Flexible working options are made available to all staff, consistent with the needs of the service, and the way people lead their lives	Achieving
The workforce is supported to remain healthy, with a focus on addressing major health and lifestyle issues that affect individual staff and the wider population	Achieving

We have engaged with our staff side colleagues in order to grade goal 3. As referenced above, there has been much work in previous years on the people management processes within Bridgewater to reflect the coming together of four provider arms of PCT's. Key issues that we are concentrating on are referenced in detail in our PSED report and the Equality Objectives Summary.

Equality Delivery System – Grading 2014 Goal 4

Goal 4 – Inclusive leadership at all levels	
Outcomes	Grade
Boards and Senior Leaders conduct and plan their business so that equality is advanced, and good relations fostered, within their organisations and beyond	Developing
Middle managers and other line managers support and motivate their staff to work in culturally competent ways within a work environment free from discrimination	Developing
The organisation uses the Competency Framework for Equality & Diversity Leadership to recruit, develop and support strategic leaders to advance equality outcomes.	Developing

We have worked on ensuring that equality is reflected in all mainstream business processes throughout the Trust. This has involved ensuring that equality is reflected appropriately on relevant meeting structures, undertaking equality analysis on relevant service redesigns and ensuring that all new and reviewed policies have an equality analysis. Again the full details of actions can be found on the webpage at: <http://www.bridgewater.nhs.uk/aboutus/equalitydiversity/equalityact2010/>

Contact Details

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