



Equality Objectives Action Plan (Equality Delivery System EDS) 2021-22 v1.0

(Based on the anticipated and potential EDS3 framework due to be launched)

Grading	Underdeveloped	Developing	Achieving	Excelling
	<p>People from all protected groups fare poorly compared with people overall OR evidence is not available</p>	<p>People from only some protected groups fare as well as people overall</p>	<p>People from most protected groups fare as well as people overall</p>	<p>People from all protected groups fare as well as people overall</p>
				

EDS Domain 1 – Commissioned or Provided Services

In response to the question how well do people from protected groups fare compared with people overall, the answer is:

- **Undeveloped** if people within two or less protected groups fare as well as people overall
- **Developing** if people within three to five protected groups fare as well as people overall
- **Achieving** if people within six to eight protected groups fare as well as people overall
- **Excelling** if people within all nine protected groups fare as well as people overall

Choosing, evaluating and rating will be done in agreement with patients, the public, community and voluntary organisations.

Objective 1 – Provide evidence that commissioned services are accessible, meeting the needs of patients and providing positive outcomes.

Lead – TBC





Aim - We will involve, engage and listen to people from communities to inform the work of the CCG to improve health outcomes and reduce health inequalities for the CCG's local population.

Evidence - 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 group, where key lessons can be learnt and applied.

Provide analysis of service delivery data captured from protected groups; looking at how that analysis is applied in practice when commissioning, procuring, designing and services. Evidence engagement with individual protected groups; Evidence Action plans for the services that require improvement or further engagement. Data and insight outcomes can be drawn from a mix of national and local sources.

Choose, evaluate and grade up to three services.

Action	Benefits/ Rationale	Lead(s)	Update	Timescale/ Deadline	Current Status	Future Goal
<p><u>Objective 1/Action 1</u> The outcomes within the 'Commissioned or provided services' goal focus on: good access to services; needs being met; patients being free from harm; and positive patient experience. NHS organisations and their stakeholders are asked to choose, evaluate and grade up to three services on these four outcomes. Data and insight for these outcomes can be drawn from a mix of national and local sources.</p>	Ensure measures are in place to analyse services in relation to patient needs, access and experience		<p>Take evidence/examples from the 'NGCCG 2020-2021 Self assessment' and 'NENC ICS Priorities and Planning':</p> <p> NGCCG 20-21 CCG self assessment templ</p> <p> 2021-22 NENC ICS Narrative Submission</p>	March 2022		Excelling 
<p><u>Objective 1/Action 2</u> Explore new ways of working and engaging with the public following analysis. Implement at least one new way of working to improve barriers to access and/or patient experience.</p>	Ensures that the local population are consistently and effectively engaged, patient experience improved and barriers to access reduced.		Evidence examples of new ways of working implemented.	December 2022		Excelling 

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EDS Domain 2 – Workforce Development and Well-being

In response to the question how well do staff from protected groups fare compared with people overall, the answer is:

- **Undeveloped** if staff within two or less protected groups fare as well as people overall
- **Developing** if staff within three to five protected groups fare as well as people overall
- **Achieving** if staff within six to eight protected groups fare as well as people overall
- **Excelling** if staff within all nine protected groups fare as well as people overall

Choosing, evaluating and rating will be done in agreement with staff members.

Objective 2 – Ensure the organisation represents the communities it serves with staff feeling engaged, supported and valued in their workplace.

Lead: TBC

Aim - To maintain and retain a well-supported, diverse, empowered, motivated and engaged workforce. Ensure staff are free from bullying and other harm; staff believe they have equal opportunities for career development; staff would recommend their organisation as a place or work or treatment;





Evidence - Capture staff profiles for the workforce; Monitor staff experiences, record data from the whole workforce that can be used to compare staff from specific groups against staff overall. For all protected groups assess and grade how well the workforce is representative, taking into account the fairness of recruitment and selection processes.

If needs be, choose specific types of people within each protected group, where key lessons can be learnt and applied. Suggested sources of data include- Health & Social Care Information Centre Workforce Statistics; NHS Staff Survey and/or internal staff surveys.

The outcomes within the ‘Workforce Development and Well-Being’ goal focus on: staff being free from bullying and other harm; staff believing they have equal opportunities for career development; staff who would recommend their organisation as a place or work or treatment; and the fair and balanced composition of the workforce. Data for these outcomes can be drawn to some extent from Key Indicators from the NHS Staff Survey, and are aligned with the WRES. The data and other insights should be evaluated and graded by NHS organisations working with staff networks and unions.

Action	Benefits/ rationale	Lead(s)	Update	Timescale/ Deadline	Current Status	Future Goal
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<p><u>Objective 2/Action 1</u></p> <p>Undertake a staff survey with a minimum of 70% response rate from staff who are not on long term sick or maternity leave</p>	<p>To engage staff and gain feedback on areas for improvement</p>		<p>Evidence/results from staff survey.</p>	<p>March 2022</p>		<p>Excelling</p> 
<p><u>Objective 2/Action 2</u></p> <p>Evidence findings from staff survey and other monitoring tools</p>	<p>Understand staff opinions on the organisation</p>		<p>Staff survey results New ways of working surveys COVID pandemic risk assessments Better Health at Work awards Return to work and a health and wellbeing conversations and surveys Evidence of reasonable adjustments made</p>	<p>December 2022</p>		<p>Excelling</p> 
<p><u>Objective 2/Action 3</u></p> <p>Implement at least one new way of working to improve staff satisfaction</p>	<p>Improve staff experience in relation to health and wellbeing, bullying and harassment and/or equal opportunities at work.</p>		<p>Describe changed/improved ways of working that have become embedded as Business as Usual at the end of COVID Pandemic.</p>	<p>December 2021</p>		<p>Excelling</p> 
<p><u>Objective 2/Action 4</u></p> <p>Undertake the CCG WRES requirements</p>	<p>Ensure that staffing reflects the diversity of the community, it serves. Improving representation and BAME staff experiences.</p>			<p>31 August 2021/22 31 October 2021/22</p>		<p>Achieving</p> 

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EDS Domain 3 – Inclusive Leadership

Rated according to the average number of instances that Board members and Senior Leaders could provide when they actively promoted equality in the last year, as part of their NHS Board or executive role. The independent evaluator will approach Board members and senior leaders for evidence for this outcome on an annual basis.

The outcome will be rated as follows:

- **Undeveloped** the average number of instances is 2 or less
- **Developing** the average number of instances is 3 to 5
- **Achieving** the average number of instances is 6 to 12
- **Excelling** the average number of instances is 13 or greater

Rated with reference to a random sample of substantive Board/Committee papers from the last year and the percentage of papers from the last year and the percentage of papers that identified equality-related impacts and how they were mitigated or managed. For Clinical Commissioning Groups, the papers should comprise those that set our commissioning or procurement approaches for services commissioned in the year.

- **Undeveloped** less than 25% of the papers
- **Developing** between 25% and 49% of papers
- **Achieving** between 50% and 74% of papers
- **Excelling** between 75% or more of papers

Objective 3 – Demonstrate how the CCG Governing Body actively leads and promotes Equality and Diversity throughout the organisation.




Lead: TBC


Aim- Ensure the CCG Governing Body actively leads on Equality and Diversity throughout the organisation and demonstrates that leadership is inclusive at all levels.

Evidence - Choose instances when Board members and senior leaders had the opportunity to demonstrate their commitment to equality in the past year or, if needs be, a longer period. For the selected instances, assess and grade the extent to which the Board and senior leaders showed a strong and sustained commitment to promoting equality, within and beyond the organisation.

Sources of evidence for grading may include: speeches given by Board members and senior leaders to various audiences; reports presented by Board members and senior leaders to various audiences; participation in Board Leadership Programmes for equality; and active promotion of equality-based initiatives for services and the workforce including local mentoring schemes.

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Action	Benefits/ rationale	Lead(s)	Update	Timescale/ Deadline	Current Status	Future Goal
<p><u>Objective 3/Action 1</u></p> <p>Ensure Equality Analysis is undertaken for all new policies and procedures that impact on the local population or staff</p>	<p>To assess the practical benefits for protected groups and to show consideration has been given to each of the protected groups when developing the policy/procedure</p>	<p>Neil Hawkins/ Hannah Brooks</p>	<p>All reports, to all committees must indicate what equalities impact assessment has been undertaken, the outcome and how this will be actioned.</p> <p>Equality impact assessment (EIA) is an integrated part of the policy development and review process. No policy is approved without the detailed EIA assessment being completed and signed off.</p>	<p>March 2022</p>		<p>Achieving</p> 
<p><u>Objective 3/Action 2</u></p> <p>Ensure 100% staff who are not on long term sick or maternity leave complete mandatory E&D training</p>	<p>To ensure awareness of E&D throughout the CCG</p>	<p>Irene Walker/ Anne Timmins</p>	<p>All staff must complete mandatory Equality & Diversity training every three years. This is closely monitored to ensure compliance. Non-compliance may affect an individual's annual pay review.</p> <p><u>Note</u> The maximum possible status for this action is 'achieving' i.e. it's not possible to exceed a 100% performance and therefore it is not possible to 'excel'.</p>	<p>March 2022</p>		<p>Achieving</p> 
<p><u>Objective 3/Action 3</u></p> <p>Evidence examples of how senior leaders show strong and sustained commitment to Equality and Diversity within the timeframe provided</p>	<p>To show that senior leaders demonstrate commitment to promoting E&D as part of a well led organisation</p>		<p>Evidence to include:</p> <p>All service development and change must complete an Equalities Impact Assessment (provide copies);</p> <p>Individual examples of members' actions that support and promote the EDI agenda (list);</p> <p>Patient recommendations are considered as part of service development, reform and commissioning. (provide copies of sample</p>	<p>December 2022</p>		<p>Achieving</p> 

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			<p>papers). https://newcastlegatesheadccg.nhs.uk/get-involved/</p> <p>That there is two - way engagement between Governing Body members and staff (through regular scheduled staff briefings).</p> <p>That there is two - way engagement between Governing Body and patients (see Governing Body minutes)</p> <p>Board members have undertaken E&D training (as per ESR reports).</p> <p>Involvement in EDI events such as Newcastle Pride.</p>			
<p><u>Objective 3/Action 4 – NHS PEOPLE PLAN ACTIONS</u> Undertake NHS People Plan actions (where applicable)</p>	<p>Foster a culture of inclusion and belonging, as well as take action to grow our workforce, train our people, and work together differently to deliver patient care</p>	<p>Hannah Brooks/Vicky Spoors/Neil Hawkins/TBC</p>	<p>1 - Overhaul recruitment and promotion practices to make sure that staffing reflects the diversity of the community, and regional and national labour markets.</p> <p>2 - Discuss equality, diversity and inclusion as part of the health and wellbeing conversations described in the health and wellbeing table.</p> <p>3- Publish progress against the Model Employer goals to ensure that the workforce leadership is representative of the overall BAME workforce.</p> <p>4 - 51 per cent of organisations to have eliminated the ethnicity gap when entering into a formal</p>	<p>DEPENDANT ON NHSEI AGREED TIMESCALES</p>		<p>Achieving</p> 

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Action	Benefits/ rationale	Lead(s)	Update	Timescale/ Deadline	Current Status	Future Goal
			disciplinary processes.			