

**UNIVERSITY HOSPITALS BIRMINGHAM NHS FOUNDATION
TRUST**

**EQUALITY DELIVERY SYSTEM 2 (EDS2) PROGRESS REPORT
OCTOBER 2016**

1. Background to Equality Delivery System (EDS) and EDS2

The Equality Delivery System (EDS) was rolled out to the NHS in July 2011 and formally launched in November 2011. The EDS is a generic toolkit and framework for assessing how NHS organisations are performing with regard to equality, diversity and human rights; how they can improve; and how they get to where they want to be.

EDS was implemented by the vast majority of NHS organisations across England. The design and implementation of the EDS was independently evaluated in November 2012. Based on this evaluation EDS was refreshed. The refreshed EDS, known as “EDS2” has now been published. It includes a core set of outcomes and a more streamlined grading system; and it encourages organisations to use it flexibly and to embrace key local health inequalities.

2. Structure of EDS2

At the heart of EDS2 are 18 outcomes, against which NHS organisations assess and grade themselves. They are grouped under four goals:

- Better health outcomes;
- Improved patient access and experience;
- A representative and supported workforce;
- Inclusive leadership.

These outcomes relate to issues that matter to people who use, and work in, the NHS.

3. Protected Characteristics

EDS2 should be applied to people whose characteristics are protected by the Equality Act 2010. The nine characteristics are as follows:

- Age
- Disability
- Gender re-assignment
- Marriage and civil partnership
- Pregnancy and maternity
- Race including nationality and ethnic origin
- Religion or belief
- Sex
- Sexual orientation

4. Additional Disadvantaged Groups

EDS2 can also be applied to people from other disadvantaged groups, including people who fall into “Inclusion Health” groups, who experience difficulties in accessing, and benefitting from, the NHS. “Inclusion Health” was defined in a Social Care Task Force and Department of Health publication of 2010. These other disadvantaged groups typically include but are not restricted to:

- People who are homeless;
- People who live in poverty;
- People who are long-term unemployed;
- People in stigmatised occupations (such as sex workers);
- People who misuse drugs;
- People with limited family or social networks;
- People who are geographically isolated.

5. Engagement with local stakeholders

Engagement with local stakeholders is central to the success of EDS2. Stakeholders are individuals, groups and organisations that have an interest in the activities of the Trust. Engagement refers to the process of getting local stakeholders involved in important decisions about the planning, developing, commissioning, management and delivery of health services. In relation to staff, engagement is about involving staff in planning, developing and managing their working environments and activities where the aim is to improve their working lives.

A list of some of the stakeholders with whom the Trust engages with is as follows:

- Sense;
- Guide Dogs;
- Action for Blind People;
- Action for Deafness;
- BITA (Birmingham Industrial Therapy Association) Pathways;
- Midland Mencap;
- Thrive Together Birmingham;
- Birmingham City Council;
- Clinical Commissioning Groups (CCGs);
- Other local trusts;
- Health Education England;
- Bournville Village Trust;
- University of Birmingham and other further education institutes;
- The Conservation Volunteers;
- The Woodland Trust;
- The National Trust;
- Public Health England;
- Age Concern Birmingham;

- The Trussell Trust;
- Birmingham LGBT;
- Royal Centre for Defence Medicine;
- Local Councillors;
- Autism West Midlands;
- Birmingham Settlement;
- Foodcycle Birmingham;
- The Prince's Trust;
- Stonewall.

6. Assessing and Grading Performance

Assessing and grading performance against the objectives should be done by the organisation's stakeholders. NHS England guidance states that 'most organisations prefer to self-assess themselves before inviting stakeholders to comment, which is fine as long as stakeholders have a genuine chance to express their views and these views are then taken fully into account'¹.

There are 4 grades available under EDS2:

Red Under developed or lack of evidence

Amber Developing

Green Achieving

Purple Excelling

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

7. EDS2 Outcomes and Actions Plan

The following table shows University Hospitals Birmingham NHS Foundation Trust's EDS2 Outcomes and Action Plan.

¹ A refreshed Equality Delivery System for the NHS – EDS2 Making Sure That Everyone Counts November 2013

Goal	Number	Description of Outcome	Evidence In Place	RAG Rating	Future Actions
Better Health Outcomes	1.1	Services are commissioned, procured, designed and delivered to meet the health needs of local communities	<ul style="list-style-type: none"> • There has been an introduction of Sage and Thyme training for Patient Carer Council members; communications skills for communicating with distressed patients or carers. • As a result of patient complaints, UHB now have patient representatives on Trust groups. • UHB's multi-faith Chaplaincy team consult with members of the local Sikh, Hindu, Jewish, Buddhist, Muslim, Humanist, Jehovah's Witness and Church of the Latter Day Saints communities across the city about practical issues relating to the care of UHB patients from those specific communities. 	Green Achieving	<ul style="list-style-type: none"> • Patient and Public Involvement guidelines are being drawn up for staff to refer to when making changes to services. • Quarterly information sheet, sharing learning from areas such as complaints, incidents, feedback, learning from excellence, safeguarding, to prevent similar issues occurring in different areas. • UHB is currently in discussion with Places of Welcome, in order to have the Trust named as a Place of Welcome, to offer welcome to those from disadvantaged, isolated groups. http://www.placesofwelcome.org/about/ • Strategic Inclusion Group has been set up in order to create a healthy model of an Inclusive workforce, balancing an environment of tolerance, whilst challenging attitudes which are deemed to exclude others.

Goal	Number	Description of Outcome	Evidence In Place	RAG Rating	Future Actions
	1.2	Individual people's health needs are assessed and met in appropriate and effective ways	<ul style="list-style-type: none"> The named nurse for Learning Disability is updating training to include the use of Shareville, Birmingham City University's interactive learning initiative. http://shareville.bcu.ac.uk/index.php Over the course of the last year, the QE multi-faith chaplaincy has extended its teaching programme amongst nursing, medical and therapy staff. This teaching has developed to better reflect the diversity within the city of Birmingham; particularly in relation to an understanding of spirituality and spiritual need in a health care context, dignity, end of life care and bereavement and care of the carer. Use of the Chaplaincy Database to record referrals and Chaplaincy activity which ensures more efficient working and more effective care for patients and staff 	Green Achieving	<ul style="list-style-type: none"> Provisional Living with Sight Loss courses being arranged for November, February and May. Development of a rolling programme of mindfulness sessions as part of the Trust's Wellbeing agenda to support staff. Two Buddhist members of the Chaplaincy team have been employed to deliver these sessions. A pilot is planned for the Autumn 2016 and this service will be quality controlled and evaluated on an ongoing basis.
	1.3	Transitions from one service to another, for people on care pathways, are made smoothly with everyone well-informed	<ul style="list-style-type: none"> The Trust has a Strategic Working Party for the Development of Transitional and Young Adult Care at UHB 'Improving Care for Teenagers and Young Adults Steering Group' 	Green Achieving	

Goal	Number	Description of Outcome	Evidence In Place	RAG Rating	Future Actions
	1.4	When people use NHS services their safety is prioritised and they are free from mistakes, mistreatment and abuse	<ul style="list-style-type: none"> Robust mandatory training sessions on Safeguarding adults and children for all patient facing staff. Patient leaflets on Safeguarding and responsibilities are available in all clinical areas. 	Green Achieving	<ul style="list-style-type: none"> Improving information for families for those patients who lack mental capacity. The current information is available on all wards and on the Trust's intranet. Improving information for patients on domestic abuse, human trafficking and female genital mutilation. The current information is available on the Trust's intranet.
	1.5	Screening, vaccination and other health promotion services reach and benefit all local communities	<ul style="list-style-type: none"> Umbrella, the Birmingham and Solihull sexual health service, has partnerships with a number of services, charities and community groups in order to reach disadvantaged groups within Birmingham and Solihull. https://umbrellahealth.co.uk/ Umbrella have teamed up with Jiu Jitsu Foundation, a self defence organisation, to promote a greater understanding of risks and protection for Birmingham university students Birmingham LGBT has launched a clinic dedicated to supporting the trans community in Birmingham and Solihull, with support from Umbrella. It will offer quality, accessible and appropriate 	Amber Developing	<ul style="list-style-type: none"> University College London and Public Health England's 'Reducing Inequality in Sexual health survey is currently underway within the Umbrella services. The goal of the study is to understand behavioural and socio-cultural drivers of sexual health inequalities in England.

Goal	Number	Description of Outcome	Evidence In Place	RAG Rating	Future Actions
			<p>sexual health and wellbeing services for all trans people.</p> <ul style="list-style-type: none"> • Umbrella have partnered up with the Rape and Sexual Violence Project (RSVP) and Birmingham LGBT to deliver a new advocacy service for the LGBT community. They will be providing practical advice and emotional support to those who have been directly impacted by rape, sexual assault or sexual abuse. The abuse can be recent, in the past or ongoing. • Health Pods, where the public can measure their height, weight, body mass index (BMI) and blood pressure are in place and in use. This allows individuals from disadvantaged groups to be able to easily access information about their health. • Walk and Talk is an initiative in partnership with Age Concern Birmingham to provide safe exercise and added value sessions for the elderly where our team follow a walk with an educational session to improve health and knowledge. http://www.ageconcernbirmingham.org.uk/blog/hospital-walking 		<ul style="list-style-type: none"> • The Trust will work with Bita Pathways in the provision of plants for the gardens and in the provision of training for service users. • UHB are currently in talks with in order to provide therapeutic visits to enhance patients' health and wellbeing, with a focus on patients with dementia and patients that have had long stays in the hospital. • UHB Cardiac Rehab will move from Cannon Hill Park to UHB Green Spaces in order to be more accessible for patients.

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					<ul style="list-style-type: none"> In response to requests from patients and medical colleagues, the Chaplaincy team are exploring research opportunities around the value of meditation for those living with chronic pain. In response to Chaplaincy Guidelines 2015 (http://www.england.nhs.uk/wp-content/uploads/2015/03/nhs-chaplaincy-guidelines-2015.pdf), the Chaplaincy Team are exploring how we might develop a contextually appropriate model of spiritual assessment for our patients.
Improved patient access and experience	2.1	People, carers and communities can readily access hospital, community health or primary care services and should not be denied access on unreasonable grounds	<ul style="list-style-type: none"> UHB have supported Guide Dogs in launching 'My Guide' aiming to help people with sight loss get out of their homes, reducing the isolation that many people with sight loss experience. QEHB has signed up to John's Campaign for the right of people with dementia to be supported by their carers in hospital. <p>http://johnscampaign.org.uk/#/</p>	Green Achieving	<ul style="list-style-type: none"> Review of carer bed provision and carers' principles has been undertaken. 16 new carer beds have been introduced with a further 37 to follow.

Goal	Number	Description of Outcome	Evidence In Place	RAG Rating	Future Actions
	2.2	People are informed and supported to be as involved as they wish to be in decisions about their care	<ul style="list-style-type: none"> The Learning and Development department deliver communication skills training to staff so that they can communicate better to patients, staff, colleagues and other visitors to the Trust. The team also provide upon request bespoke training courses to teams, which may be the result of patient feedback, incident etc. The communication toolbox enables staff in wards to communicate with a diverse range of patients. 	Amber developing	<ul style="list-style-type: none"> To continue to develop coaching and training support to staff, in order to enable them to confidently support and empower patients to be involved in their care. To gradually embed the inclusion strategy within the revised training programmes In accordance with the Accessible Information Standard, high level scoping and action plans have been put in place.
	2.3	People report positive experiences of the NHS	<ul style="list-style-type: none"> Increased training provision around communication skills, including an information portal, and a menu of training opportunities for staff of all levels. Increased help for patients at mealtimes with the introduction of dining companions (Dietetics, Speech and Language Therapists and volunteers) and the red tray/jug system, which signals that patients need support when eating or drinking. We have installed following review with Dieticians and SALT (Speech and Language Therapy), new menus reflecting a range of different ethnic 	Green Achieving	<ul style="list-style-type: none"> Vending contract is up for renewal via tender; healthier eating options will be part of the tender submission along with traditional snack items. Due to be in place in 2017.

Goal	Number	Description of Outcome	Evidence In Place	RAG Rating	Future Actions
			<p>food for patient meals. The review was set up from feedback from the Asian community from the chaplaincy. The review involved members of the public and a nominated supplier was rewarded from this collaboration. The menus have been in place since March 2015 and Catering have received no negative feedback since. The menu also improved the choice for Vegetarian Asian / Kosher / Afro Caribbean / Halal meat meals.</p> <ul style="list-style-type: none"> • Dementia care Rio crockery which dementia patients have been more comfortable using due to their familiarity with drinking from crockery rather than plastic cups, has improved the amount of fluid dementia patients drink in a day and has been installed on ten wards W1, W2, Bournville, Harborne, 410, 513, 514, 516, 517 and 518. • Launch of a task and finish group scoping the best ways to obtain feedback from harder to reach groups e.g. those with cognitive impairment, children, patients with other language or communication barriers. • Governors and Patient Carer Council members visit wards and departments as part of Adopt a ward/department visits (PCC) and Governor drop ins to 		<ul style="list-style-type: none"> • Analysis of survey responses against demographics has started to be undertaken. A more robust method for this type of review needs to be built into the new Patient Experience system currently being scoped. • Task and finish group established to pilot dining

Goal	Number	Description of Outcome	Evidence In Place	RAG Rating	Future Actions
			<p>Outpatients (Governors)</p> <ul style="list-style-type: none"> • Patient surveys collect demographic data. • A priority alert system is in place regarding patients who are regular attenders and who have complex needs. Electronic alerts are generated upon admission which enables support to be provided by senior staff to staff, the patient and their carers. • Food and Clothes Bank - In partnership with The Trussell Trust and the hospital's Faith and Community Centre, the Trust is operating a food collection point to which members of staff, patients or visitors can donate food items to help those in real need. As a result of this partnership, staff will be able to use this resource by giving vouchers to patients who are in need of support. This may come in the form of a Trussell Trust referral voucher, which can be redeemed at a food bank for a three day supply of food, or out-of-hours, staff will be able to supply an emergency food box for those in need. The Trussell Trust food banks are about more than food. People who are referred to them are also offered practical and emotional support by sign posting other agencies, whether that is 		<p>companions at mealtimes.</p> <ul style="list-style-type: none"> • Task and finish group established to look at introducing a therapeutic dog visiting scheme. • Task and finish group established to meet the accessible information standard • Currently collaborating with Heart of England NHS Foundation Trust to introduce projects such as the Food and Clothes Bank to their hospitals.

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			<p>financial advice or counselling services or in some cases help with clothing. http://www.uhb.nhs.uk/food-and-clothing-bank.htm</p> <ul style="list-style-type: none"> The Food bank collaboration expanded in October 2015 to include clothing donations. This enables staff to draw down a clothing parcel in addition to a food parcel for any patient assessed to be in need. We expanded and enhanced the collection points to provide three points across the trust for staff and visitors to donate. Since the start of the Food and Clothes Bank, UHB staff have donated 777.1kg of food, the equivalent of 1689 meals, and 1800kg of clothes. 		
	2.4	People's complaints about services are handled respectfully and efficiently	<ul style="list-style-type: none"> Details of the NHS Complaints Advocacy service, who are able to provide support to complainants throughout the process, are provided to all complainants at the outset. Responses can be provided in alternative formats (e.g. large font and in other languages) on request. Every effort is always made to accommodate any particular requests wherever possible. Copies of all complaints with an 	Green Achieving	<ul style="list-style-type: none"> Patient relations process mapping being undertaken. Internal complaints review panel being set up.

Goal	Number	Description of Outcome	Evidence In Place	RAG Rating	Future Actions
			<p>Equality and Diversity Element are sent to the Trust EDS Lead.</p> <ul style="list-style-type: none"> • Robust process for quality assurance of complaints in place. • Single point of access number for concerns/complaints introduced. 		
Empowered, engaged and well-supported staff	3.1	Fair NHS recruitment and selection processes lead to a more representative workforce at all levels	<ul style="list-style-type: none"> • The Trust has worked with Autism West Midlands to support people with autism into work placements/paid employment within the Trust. • Learning Hub Overview: From April 2015 – February 2016, we have supported 160 people into work, of which 25% were 18-24 yr. olds. We have a further 60 clients who we are waiting for a start date or for the employer to provide us with a confirmation of employment. <p>Courses Delivered to date:</p> <p>The Learning Hub has delivered two Princes Trust programmes so far this financial year (May and Aug) and 100% of the May group now all have job offers (9 out of the 13 jobs are with the NHS). https://www.bvsc.org/news/get-hospital-services-princes-trust</p> <p>RISE – 18-24 Homeless young people:</p>	Amber Developing	<ul style="list-style-type: none"> • UHB are the lead partner within a Healthcare consortium which is one of six delivery partners within Birmingham city Councils Youth Promise Plus initiative. To date we have delivered training to 154 young people with a further 34 courses planned until June 2018 and with the scope to add in additional as required. We are continuing to work with Prince's Trust on the "Get Into Hospitals" programme, St Basils and B'ham Social Services for the Rise programme.

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			<p>2 programmes have been delivered within the financial year (April 2016 and Sept 2016).</p> <p>For the April 2016 Rise cohort we had eleven referrals of which four did not complete, five have got jobs, one went into further education and we are still working with one.</p> <p>In 2015/16 the Learning Hub supported 176 clients into employment of which 54.5% were of BME origin and 33% were within the 18 – 24 years old age bracket.</p> <p>To date for 2016 / 17 we have supported 51 clients into employment with a further 15 waiting on start dates.</p>		
	3.2	The NHS is committed to equal pay for work of equal value and expects employers to use equal pay audits to help fulfil their legal obligations	<ul style="list-style-type: none"> The Trust assesses senior manager and director salaries on an annual basis to ensure there are no gender pay gaps. The Trust utilises Agenda for Change job evaluation which has been legally found to underpin equal pay for work of equal value principles. 	Green Achieving	
	3.3	Training and development opportunities are taken up and positively evaluated by all staff	<ul style="list-style-type: none"> Mandatory training compliance is 86%. Attendance at training is inputted into ESR so protected characteristics can be monitored. 	Green Achieving	<ul style="list-style-type: none"> To continue to monitor course attendance and evaluation feedback to ensure that all training delivered is fit for purpose and is inclusive to all

Goal	Number	Description of Outcome	Evidence In Place	RAG Rating	Future Actions
			<ul style="list-style-type: none"> All training and development opportunities are displayed via the internal intranet site for staff to attend. In addition staff are reminded to attend training required for their role by a variety of methods to include: - compliance is displayed to Mandatory training on me@QEHB, regular reminders are forwarded by the team as part of the Mandatory and Statutory policy and procedure. Staff are also encouraged to evaluate training sessions attended either by voting pad input and automated feedback forms. Staff survey 2015: 73% of staff said they had received job relevant training or development in the last 12 months. Staff survey 2015: the quality of non-mandatory training, learning or development is in the best 20% for acute trusts. 		staff.
	3.4	When at work, staff are free from abuse, harassment, bullying and violence from any source	<ul style="list-style-type: none"> Staff survey results show 12% of staff experience physical violence from patients, relatives or the public in the last 12 months; no change from 2014. This is 2% lower than the average for acute trusts and 2% higher than the best 2015 score for acute trusts. 	Green Achieving	
	3.5	Flexible working options are available to all staff	<ul style="list-style-type: none"> Work life balance policy - any employee can request flexible working 	Green Achieving	

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		consistent with the needs of the service and the way people lead their lives	<p>arrangements; however, all requests will be subject to the need to deliver high quality service to patients.</p> <ul style="list-style-type: none"> 20% of staff who took part in the Staff Survey reported working part-time. 		
	3.6	Staff report positive experiences of their membership of the workforce	<ul style="list-style-type: none"> Staff survey results from 2015 put the Trust in the top 20% of acute Trusts in terms of staff recommendation as a place to work or receive treatment. Health Pods, where staff can measure their height, weight, BMI and blood pressure have been introduced with a proposed plan for staff access. This allows individuals from disadvantaged groups to be able to easily access information about their health. UHB are currently working with Stonewall as part of the Diversity Champions programme so the Trust can be placed on the Stonewall Equality Index and work towards improving the working environment of LGBT staff. UHB has started its first staff network 	Amber Developing	<ul style="list-style-type: none"> Staff Affected by Domestic Abuse Procedure is currently being updated. Alcohol and Substance Abuse Policy is currently being updated. This aims to support staff who wish to be proactive in their recovery from alcohol and substance addiction. Stress Policy and Procedure is in the process of being assessed and updated, which aims to improve the working lives of staff.

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			<p>for LGBTQ* staff which aims to improve the care for LGBTQ* service users and the working lives of staff.</p> <ul style="list-style-type: none"> Black History Month has organised for October 2016. The month will be focused on a celebration of the career progression and the success of BME employees. 		
Inclusive leadership at all levels	4.1	Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations	<ul style="list-style-type: none"> Inclusion (previously Equality and Diversity) forms an integral part of all of the Trust induction programmes and recruitment and selection practice. Inclusion training sessions are advertised via the internal Trust Education website and in addition bespoke training courses are provided by the team. Inclusion - Our Inclusion sessions at UHB identify that the concept of Inclusion is not a tick box exercise but instead requires a different mind-set, thinking skills and new perspectives. Our Inclusion programme looks to challenge personal perspectives around Inclusion and Inclusive Leadership. Skillssets needed for Inclusive Leadership to ensure that all staff has the ability to recognise and realise talent, and be empowering and engaging resulting in increased performance. 	Amber Developing	

Goal	Number	Description of Outcome	Evidence In Place	RAG Rating	Future Actions
			<p>These sessions are aimed at staff in management and/or leadership roles, but can be attended by any staff member.</p>		
	4.2	Papers that come before the Board and other major Committees identify equality-related impacts including risks, and say how these risks are to be managed	<ul style="list-style-type: none"> All policies that come before Policy Review Group are impact assessed and this has to be present at PRG. PRG is led by The Director of Corporate Affairs. The Equality Impact Assessment has been updated to include carer responsibilities. Launch of new 360 appraisal form/training which requires feedback from more than manager. 	Amber Developing	
	4.3	Middle managers and other line managers support their staff to work in culturally competent ways within a work environment free from discrimination	<ul style="list-style-type: none"> A comprehensive programme of communication training is in place to support a newly launched set of Trust communication expectations. A dedicated web based communication resource has been recently launched and is designed to support all aspects of good communication practice across the Trust. Additionally the Trust has commissioned a group of actors and developed a series of short plays to embed the importance of good communication and being culturally aware. Inclusion forms part of all Trust 	Green Achieving	<ul style="list-style-type: none"> 1:1 coaching support for all managers to enhance culturally competent practice is being developed.

Goal	Number	Description of Outcome	Evidence In Place	RAG Rating	Future Actions
			<p>Leadership offerings currently provided within the Trust. Inclusion training sessions are advertised via the internal Trust Education website and in addition bespoke training courses are provided by the team.</p> <ul style="list-style-type: none"> • Inclusion - Our Inclusion sessions at UHB identify that the concept of Inclusion is not a tick box exercise but instead requires a different mind-set, thinking skills and new perspectives. Our Inclusion programme looks to challenge personal perspectives around Inclusion and Inclusive Leadership. Skillsets needed for Inclusive Leadership to ensure that all staff has the ability to recognise and realise talent, and be empowering and engaging resulting in increased performance. <p>These sessions are aimed at staff in management and/or leadership roles, but can be attended by any staff member.</p> <ul style="list-style-type: none"> • Chaplaincy team working through regular training opportunities to develop a more culturally & religiously informed workforce relating to end of life care. • In response to requests made in ongoing training sessions around 		

Goal	Number	Description of Outcome	Evidence In Place	RAG Rating	Future Actions
			<p>Spiritual, Religious and Pastoral Care, the Chaplaincy Team have developed a new training opportunity for the Care Certificate programme around Communication and Listening Skills.</p> <ul style="list-style-type: none"> • The introduction of Community Guided Sight training for front house staff at reception 		