

NORTHUMBERLAND TYNE AND WEAR NHS FOUNDATION TRUST

BOARD OF DIRECTORS MEETING

Meeting Date: 25 March 2015

Title and Author of Paper: Equality Delivery System and Workforce Race Equality Standard
Christopher Rowlands Equality and Diversity Advisor

Paper for Debate, Decision or Information: Information

Key Points to Note:

The NHS Equality and Diversity Council (EDC) has succeeded in implementing two measures to improve equality across the NHS into the Standard Contract, which will start in April 2015.

- A workforce race equality standard that will require the Trust to demonstrate progress against a number of indicators of workforce equality, including a specific indicator to address the low levels of BME Board representation.
- Equality Delivery System (EDS2)
- We are required to publish our baseline data for April 1st 2015, no later than July 1st 2015

N.B This report includes attachments which contain a lot of detail; therefore, these attachments only need to be read or referred to if the reader requires further information.

Outcome required:

To note and

It is proposed that the final documentation for EDS2 and the Workforce Race Equality Standard is received by Trust Board in June 2015 to meet the publication deadline.

Background

The NHS Equality and Diversity Council (EDC) has succeeded in implementing two measures to improve equality across the NHS into the Standard Contract, which will start in April 2015.

- A workforce race equality standard that will require the Trust to demonstrate progress against a number of indicators of workforce equality, including a specific indicator to address the low levels of BME Board representation.
- Equality Delivery System (EDS2)

Race Equality Standard

There are nine metrics. Four of the metrics are specifically on workforce data and four of the metrics are based on data derived from the national NHS Staff Survey indicators. The latter will highlight any differences between the experience and treatment of White staff and BME staff in the NHS, with a view to closing the gaps highlighted by those metrics. The final metric requires provider organisations to ensure that their Boards are broadly representative of the communities they serve.

The metrics are:

Workforce Metrics

- Percentage of BME staff in Bands 8-9, VSM (including executive Board members and senior medical staff) compared with the percentage of BME staff in the overall workforce
- Relative likelihood of BME staff being appointed from shortlisting compared to that of White staff being appointed from shortlisting across all posts.
- Relative likelihood of BME staff entering the formal disciplinary process, compared to that of White staff entering the formal disciplinary process, as measured by entry into a formal disciplinary investigation*
- Relative likelihood of BME staff accessing non-mandatory training and CPD as compared to White staff

*Note: this indicator will be based on data from a two year rolling average of the current year and the previous year.

National NHS Staff Survey findings

For each of these four staff survey indicators, the Standard compares the metrics for each survey question response for White and BME staff.

- KF 18. Percentage of staff experiencing harassment, bullying or abuse from patients, relatives or the public in last 12 months
- KF 19. Percentage of staff experiencing harassment, bullying or abuse from staff in last 12 months
- KF 27. Percentage believing that trust provides equal opportunities for career progression or promotion

- Q23. In the last 12 months have you personally experienced discrimination at work from any of the following?
b) Manager/team leader or other colleagues

Boards

Does the Board meet the requirement on Board membership in 9?

- Boards are expected to be broadly representative of the population they serve.

The Race Equality Standard will require that we undertake the following actions

- Publish our baseline data for April 1st 2015, no later than July 1st 2015.
- To do what we are already required to do because of the Public Sector Equality Duty. Whilst we collect these data we need to make sure of their quality. Rather than simply collecting we need to analyse and act upon the findings to a greater degree.
- There will need to be a discussion with our commissioners to ensure that we are collecting, analysing and publishing the data and to establish the base line data on each indicator. The Trust will need to decide upon actions for the the next year so that we can demonstrate progress. What that rate of progress should be will be agreed locally with commissioners.
- At the end of the first year (2016) the progress on the metrics will be shared with commissioners (and staff) and published. The data will be shared across the NHS so that organisations can benchmark themselves and such benchmarking will help identify good practice organisations that others can learn from.
- No central body will tell the Trust what our local targets should be or how to achieve them, but we will be expected to demonstrate measurable progress year on year. To do that will require the Trusts to analyse reliable data and listen to our staff including especially BME staff, to understand how differences in treatment arise so that remedial action can be taken.

Equality Delivery System 2

The Equality Delivery System (EDS) for the NHS was made available to the NHS in 2011 – (the Trust engaged in the first round of EDS in the preparation of the Equality Strategy for 2012-2016). Following an evaluation of the implementation of the EDS in 2012, and subsequent consultation with a spread of NHS organisations, a refreshed EDS is now available. It is known as EDS2.

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

1. Better health outcomes
2. Improved patient access and experience
3. A representative and supported workforce
4. Inclusive leadership

The full documentation for EDS2 is appended to this report.

EDS2 Work to date

SMT in January 2014 agreed to adopt NHS England's 9 step plan for implementing EDS2. Evidence so far has been amassed from a desktop study and discussion at an EDS 2 Workshop held in November 2014. The work is on course to meet the NHS England timescales and has been helped by the identification of EDS champions who provide vital operational knowledge to help us analyse our performance, agree grade and prepare equality objectives that integrate with our immediate plans and will work with mainstream business planning

Recommendations

It is important that the work towards the Workforce Race Equality Standard is tied into that of the EDS2 and that any actions arising from the standard fit with actions under goal three of EDS2. It is proposed that in line with the reporting timescales for the Workforce Race Equality Standard, that we derive a set of Equality Actions to address issues highlighted in the EDS2 desktop exercise and consult widely on those ratings and actions. Consultation should be as wide as possible; discussions have already taken place with the Deputy Director of Partnerships as to how this might best be done. The aim will be to include service users, carers, members of community groups, other members of the public, representatives of voluntary and community organisations, governors (an engagement session will be run with the council of governors), representative memberships of staff and staff-side organisations and encompass all protected groups

NHS England are developing a national EDS Dashboard to be part of a national Equality and Health Inequalities resource hub, this seems in line with the original intentions of the first release of EDS to produce a 'league table' of equality and diversity performance – this will also incorporate Race Equality Standard data. Given this it is important that we continue to follow the EDS 9 step plan and that awareness of and engagement with the development of our EDS2 response is widely held throughout the Trust.

It is proposed that the final documentation for EDS2 and the Workforce Race Equality Standard is received by Trust Board in June 2015 to meet the publication deadline.

Christopher Rowlands
Equality and Diversity Advisor
December 2014