Report to the People Committee
26th April 2023

Title of report	Equality Delivery System (EDS) 2022
Purpose of the report	For information, assurance, discussion or decision (please delete as appropriate)
Executive Lead	Lynne Shaw, Executive Director of Workforce & OD
Report author(s) (if different from above)	Christopher Rowlands – Equality, Diversity & Inclusion Lead Emma Silver Price – Equality, Diversity & Inclusion Officer

Strategic ambitions this paper supports (please check the appropriate box)

Work with service users and carers to provide excellent care and health and wellbeing	✓	Work together to promote prevention, early intervention and resilience	
To achieve "no health without mental health" and "joined up" services		Sustainable mental health and disability services delivering real value	
To be a centre of excellence for mental health and disability		The Trust to be regarded as a great place to work	✓

Sub-groups of People Committee

Executive Directors	
Trust Leadership Team (TLT)	
Business Delivery Group (BDG)	
Other i.e. external meeting	

Board Assurance Framework/Corporate Risk Register risks this paper relates to (please insert risk reference number and risk description)

People Committee
26th April 2023

Equality Delivery System (EDS) 2022

1. Executive Summary

The EDS is the foundation of equality improvement within the NHS. It is an accountable improvement tool for NHS organisations in England to review and develop their services, workforces, and leadership. It is driven by evidence and insight. The third version of the EDS (EDS 2022) was commissioned by NHS England and NHS Improvement with, and on behalf of, the NHS, supported by the NHS Equality and Diversity Council (EDC). It is a simplified and easier-to-use version of EDS2.

The EDS comprises eleven outcomes spread across three Domains, which are:

1. Commissioned or provided services.
2. Workforce health and well-being
3. Inclusive leadership.

The outcomes are evaluated, scored, and rated using available evidence and insight. It is these ratings that provide assurance or point to the need for improvement. The EDS is designed to encourage the collection and use of better evidence and insight across the range of people with protected characteristics described in the Equality Act 2010, and so to help NHS organisations meet the public sector equality duty (PSED) and to set their equality objectives.

2. Key issues, significant risks and mitigations

EDS required us to gather evidence on 3 service areas for domain 1. Following discussions with Executive Directors, we collected information on the following Community Treatment Teams – chosen to best represent the diverse population which the Trust serves.
- Gateshead East and West Community Treatment Teams
- Newcastle East and West Community Treatment Teams
- North Cumbria Community Treatment Teams

We worked with operational colleagues to gather data and evidence for domain 1 and at a Corporate level for Domains 2 and 3. A detailed scorecard is provided by NHS England for each of the eleven outcomes, which leads to a score for each domain. Details of our evidence and performance on each outcome are detailed in the appended report. The outcome for each domain and an overall rating is as follows.
1. Commissioned or provided services. Score of 5 out of a possible 12 rated as Developing.
2. Workforce health and well-being. Score of 6 out of a possible 12 rated as Achieving.
3. Inclusive leadership. Score of 6 out of a possible 9 rated as Achieving.

Adding all outcome scores in all domains gives us a total score of 19 out of a possible 35. Trust who score between 8 and 21, adding are rated Developing.

3. Recommendation/summary

We know from the analysis of data in our Equality Delivery System 2022 submission that we need better information on the protected characteristics of our service users. We will therefore:

- Work with the localities to ensure that there is an effective way to record these, and that staff are given support and resources to ensure they feel confident in collecting these.
- Seek to develop meaningful relationships with communities, groups and organisations to:
    - Remove or minimise disadvantages suffered by people due to their protected characteristics.
    - Take steps to meet the needs of people from protected groups where these are different from the needs of other people.
    - Encourage people from protected groups to participate in public life or in other activities where their participation is disproportionately low.

These will be key to our EDI Actions for 2023-24 which will be brought to The People Committee's July meeting. The Committee is asked to approve these actions. Assurance on EDS 2022 will form part of our regular updates to the Committee.

Christopher Rowlands   Lynne Shaw
Equality Diversity and Inclusion Lead   Executive Director Workforce and OD

April 2023

NHS England

NHS Cumbria, Northumberland, Tyne and Wear NHS Foundation Trust

NHS Equality Delivery System 2022
EDS Report

Version 1, 15 August 2022

Contents

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: www.england.nhs.uk/about/equality/equality-hub/patient-equalities-programme/equality-frameworks-and-information-standards/eds/

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 england.eandhi@nhs.net and published on the organisation's website.

NHS Equality Delivery System (EDS)

Name of Organisation		Cumbria, Northumberland, Tyne & Wear NHS Foundation Trust (CNTW)	Organisation Board Sponsor/Lead		
			Lynne Shaw, Executive Director of Workforce and Organisational Development		
Name of Integrated Care System		North East North Cumbria Integrated Care System (NENC ICS)			
EDS Lead	Christopher Rowlands – Equality, Diversity & Inclusion Lead Emma Silver Price – Equality, Diversity & Inclusion Officer		At what level has this been completed?		
				*List organisations	
EDS engagement date(s)	8/2/23 and 21/3/23		Individual organisation		
			Partnership* (two or more organisations)	CNTW in conjunction with Tees, Esk and Wear Valley Foundation Trust	
			Integrated Care System-wide*		
Date completed	April 2023		Month and year published	May 2023	
Date authorised			Revision date		

EDS Rating and Score Card

Please refer to the Rating and Score Card supporting guidance document before you start to score. The Rating and Score Card supporting guidance document has a full explanation of the new rating procedure, and can assist you and those you are engaging with to ensure rating is done correctly

Score each outcome. Add the scores of all outcomes together. This will provide you with your overall score, or your EDS Organisation Rating. Ratings in accordance to scores are below

Undeveloped activity – **organisations score out of 0** for each outcome	Those who score **under 8,** adding all outcome scores in all domains, are rated **Undeveloped**
Developing activity – **organisations score out of 1** for each outcome	Those who score **between 8 and 21,** adding all outcome scores in all domains, are rated **Developing**
Achieving activity – **organisations score out of 2** for each outcome	Those who score **between 22 and 32,** adding all outcome scores in all domains, are rated **Achieving**
Excelling activity – **organisations score out of 3** for each outcome	Those who score **33,** adding all outcome scores in all domains, are rated **Excelling**

Domain 1: Commissioned or provided services

Gateshead, Newcastle and North Cumbria teams: Gateshead East CTT, Gateshead West CTT, Newcastle East Psychosis/Non Psychosis CTT, Newcastle West Psychosis/Non Psychosis CTT, EIP Gateshead, ARMS, EIP Newcastle, Individual Placement Support, Newcastle memory Service, North Cumbria ARMS, North Cumbria EIP, North Cumbria, West CTT, North Cumbria East CTT, North Cumbria CAMHS, North Cumbria Memory and Later Life West, North Cumbria Memory and Later Life East

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	Data is from 01/01/22 – 01/01/23 Most of the service users accessing services are of White British ethnicity (80.2%) with 'not stated' as the second highest. The population breakdown of CNTW area is majority White British. Gender split is 54.8% female to 45.1% male for referrals into the services during the period. For religious belief, the majority of service users have 'unknown religion' (83.6%) followed by 'Christian' and then 'None' The majority of referrals come from the local North East Region however there are referrals from come from all over the UK (based on client postcode area). Waiting times analysis for those waiting over 18 weeks to assessment and treatment reflects the above. The vast majority of those waiting over 18 weeks for assessment and treatment are from White British background with no significant variation by gender.	1	
	1B: Individual patients (service users) health needs are met	All service users coming into inpatient wards are screened for physical health needs e.g. smoking status, alcohol use, long term conditions e.g. diabetes. If anyone smokes, then a referral can be made to the smoking service to help quit. There are no restrictions on access to this service in terms of demographics. Physical health needs are managed in a needs-led way and there are no restrictions again. For those on the SMI register, an annual health check is expected to be offered and completed by Primary Care in line with National policy. There are no	1	

		restrictions with being able to access this offer, however Primary Care struggles to engage with the client group. There is one team in Northumberland that has been commissioned to provide this service on behalf of Primary Care. Waiting times – demographics play no part in the length of time someone waits on the waiting list. If someone is waiting and needs change then there may be intervention provided by CNTW or another organisation to support the individual whilst on a waiting list. This is needs-based and is not influenced by demographics.	
	1C: When patients (service users) use the service, they are free from harm	The Trust has one of three Quality Goals from the CNTW Strategy that is "Keeping you safe" with the following aims: • Learning from experience • Openness in reporting • Demonstrating improvement • Reduction in incidents of harm • Smooth transitions from one service to another • Better suicide prevention The Trust has a strong culture of being open and reporting incidents. Staff are encouraged to report incidents and near misses. Systems are in place to review, reflect and learn from incidents and to share that learning across the Trust. Work is ongoing to ensure reporting categories on the incident management system allow reporting and review of incidents related to protected characteristics Learning From Patient Safety Events System (LFPSE) is now collecting significant amounts of data, which are being used to help make services safer with CNTW being one of the first trusts to enter incidents directly into the system. Work is ongoing to ensure reporting categories on the incident	2

| | | management system allow reporting and review of incidents related to protected characteristics.

CNTW recognises that Patient Safety must be integrated into the education and training curriculum of all staff and staff must be provided with adequate time to attend where required. CNTW has a fully developed Academy with responsibility for Learning and Development across the Trust. The Academy covers everything from essential and statutory training, advanced clinical practice and basic numeracy and literacy through to in-house bespoke accredited courses.

Included in the Academy is the Accredited Learning Centre approved to design, deliver and award courses of study at Academic levels 3 to 6 (from Level 3 (A-Level standard) all the way to Level 6 and 7 (degree and master's degree standard).

The Accredited Learning Centre status is equal to any other organisation that delivers education at these levels and all courses are ultimately approved by The Quality Assurance Agency (QAA), the same body that approve education within colleges and Universities.

The Accredited Learning Centre is lead and managed by the CNTW Academy but is approved by the QAA under the leadership of Professional and Clinical Academics.

All topic areas for development into courses are prioritised by the Trust executive and CNTW Academy directors. From there, the Accredited Learning Centre team design, approve and quality assure courses and programmes working with various partners to academically validate them. In other words, the courses are designed in partnership with clinical subject experts to meet the educational and development needs of CNTW's workforce. | | |

Several technologies are also making significant improvements to care and patient safety across the trust including:

- Electronic Prescribing reducing medication errors
- Body Worn Cameras to allow staff to record and learn from incidents on inpatient wards
- Oxevision supporting the trusts Observation and Engagement policies
- Metal Detectors being installed on inpatient units to prevent inappropriate items being brought onto our inpatient units
- Monitored and recorded CCTV across the trust

Protected Characteristics data for Gateshead, Newcastle & N Cumbria teams

Ethnicity	Harm Incidents (Victim only)		% of patients across specified teams
	Count	%	
White - British	676	83%	80%
Not Known	30	4%	
Not Stated	26	3%	
Groups other than White British	86	11%	
Grand Total	818		

Gender	Harm Incidents (Victim only)		% of patients across specified teams
	Count	%	
Female	484	59%	55%
Male	329	40%	45%
Other	5	1%	

Grand Total		818		

Age Ranges	Harm Incidents (Victim only)		% of patients across specified teams
	Count	%	
0-15	142	17%	25%
16-30	178	22%	24%
31-40	75	9%	12%
41-50	52	6%	9%
51-60	51	6%	8%
60+	322	39%	23%
Grand Total	818		

The above table is based on the data from the Gateshead, Newcastle and North Cumbria Community Teams. It compares the harm incidents to the % of patients with those protected characteristics within those teams. The harm incidents exclude incidents where the patient was the perpetrator. This data highlights that there were more harm incidents to female patients compared to the percentage of female patients in the service. It also highlights that despite the percentage of patients over 60 being 23% there they accounted for 39% of the incidents within those teams. This is largely due to the higher risk of falls from elderly frail patients.

1D: Patients (service users) report positive experienc	From Points of You (PoY) we do see that older age groups (65+) have a better experience of services compared to younger age groups (under 18 year olds and 19-24). Poorest experience is with service users that don't state an age, prefer not to say and 19-24 year olds. For the 19-24 age group which had the lowest experience score, there was an almost equal number of positive and negative comments received. Negative relate to communications and patient care and positive comments relate to communications and values and behaviours of the staff.	1	

	es of the service	There is minimal difference in experiences of those with and without a disability. Poorest experiences from those who did not answer the question. Feedback broken down by ethnicity shows that Asian/Asian British and Black/African/Caribbean have a better experience however this is based on lower numbers responding to PoY compared to White British who score third highest. Those preferring not to say their age and not stated had a poorer experience however this is based on low numbers of responses with these categories. The CQC community mental health survey focuses on adult service users' feedback.		
Domain 1: Commissioned or provided services overall rating			5	

Domain 2: Workforce health and well-being

Domain	Outcome	Evidence	Rating	Owner (Dept/Lead)
Domain 2: Workforce health and well-being	2A: When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions	Staff currently have access to a range of health support and resources, summarised as follows: Covid-19 workplace risk assessments; centralised reasonable adjustment budget; lunchtime chair yoga; menopause café support group; good mood café support group; meditation café; QUIT Team smoking cessation staff support; A Weight Off Your Mind physical activity staff initiative; internal Staff Psychological Centre; 'Know Your Numbers' staff health checks via Healthworks Newcastle & NPH Group across CNTW sites; Mind Health and Wellbeing Group; Disabled Staff Network; staff Health Wellbeing champions; a wide range of self-help leaflets available to staff on mental health and wellbeing; Staff Wellbeing Hub which supports health and care staff to access what they need to stay mentally well and was set up as a response to the COVID-19 pandemic.	2	

| | 2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source | 1. **MOST RECENT STAFF SURVEY**
Following results of the 2022 annual NHS Staff Survey, the majority of CNTW staff said the people they work with are understanding and kind to one another and also that people are polite and treat each other with respect. High numbers of staff also said their manager cares about their concerns and takes effective action to help with any issues they may need support with. Fewer than 6% of staff who responded said they have personally experienced discrimination at work. Although the response to this question is better than the average score achieved by other mental health and learning disability Trusts who took part, CNTW remains committed to continuously improving the experiences of the workforce and the Staff Networks work closely with senior and line management to progress this important aspect of working life. Looking at Question 16(c) of the staff survey, 'what grounds have you experienced discrimination?', we know the following:
• Ethnicity and Religious discrimination is below the benchmark average
• Gender, Sexual Orientation and Disability are above the benchmark average. Whilst this is usual information, we look at data trends for the Trust and have targeted actions in the past year around ethnicity, disability, sexual orientation and gender.

2. **MOST RECENT WRES & WDES ANNUAL REPORT**
The most recent CNTW WRES & WDES Annual Report (31 March 2022) highlights the following:
• The most recent WRES & WDES Annual Report includes 2021 Staff Survey results, which found:
    ○ 44.6% of BAME staff and 29.4% of White Staff said they had experienced harassment, bullying or abuse from patients, relatives or the public in the last 12 months | 2 | |

o 15.5% of White staff and 24.1% of BAME staff stated that they had experienced harassment, bullying or abuse from staff in the last 12 months

o 5.1% of White staff and 14.4% of BAME experienced discrimination at work from manager / team leader or other colleagues in last 12 months

o 34% of disabled staff and 28.8% of non-disabled said they had experienced harassment, bullying or abuse from patients, relatives or the public in the last 12 months

o 11.6% of disabled staff and 4.9% of non-disabled staff stated that they had experienced harassment, bullying or abuse from a manager in the last 12 months

o 15.2% of disabled staff and 11.1% of non-disabled staff stated that they had experienced harassment, bullying or abuse from other staff in the last 12 months

o 66.1% of disabled staff and 67.7% of non-disabled staff said that the last time they experienced harassment, bullying or abuse at work, they or a colleague reported it.

From the above, the Trust has committed to:
- Develop a strand of the Respect Campaign to address bullying, harassment or abuse from patients, relatives, the public, other staff, and line managers or team leaders
- Develop a PGN to address discrimination against staff
- Promote allyship
- Identify evidence-based interventions and focus groups with staff to address staff survey disparities

3. The Respect Campaign has been successfully rolled out across the Trust. Following 'Train the Trainer' workshops from A Kind Life, CNTW now have internal facilitators to deliver a Respectful Resolution

| | | Programme which underpins our Trust Values. The programme provides helpful tools and guides staff through the process of developing team values, reflecting on and identifying behaviours, initiating respectful conversations, and supporting resolution with colleagues. The goal is for teams to create a 'safe space' culture and to reduce the need for formal processes. Many sessions have been delivered to date and are ongoing, as well as bespoke sessions that have been tailored to individual teams' needs.

4. Freedom to Speak Up Guardians and Champions

5. Work ongoing with the EDI and Safer Care Team alongside local Police to address hate crimes that have been reported by staff. | | |

| | 2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source | 1. Thrive is CNTW's external health and wellbeing website, which is open to both staff and the public. The website is full of useful information and support for emotional health, physical health, benefits & discounts, career development and occupational health. Thrive includes access to resources on emotional, physical, psychological, social, and financial wellbeing

2. PAM Assist Occupational Health: provides a range of services designed to support and improve staff's overall health and wellbeing

3. Employee Assistance Programme (via Vivup): staff can access impartial, confidential advice from qualified counsellors

4. Staff Psychological Centre

5. Staff Networks

6. Staff Side and Trade Union support

7. Freedom To Speak Up Guardians and Champions | 2 | |

| | 2D: Staff recommend the organisation as a place to work and receive treatment | The 2022 Staff Survey results illustrate that CNTW staff feel that their work is important, with 85.9% of staff saying they felt that their role makes a difference to service users and patients.

The Trust's commitment to its service users was reflected in the survey results. High numbers of staff who responded said that they feel that the care of patients and services users is a top priority for the organisation and that the organisation acts on concerns raised by patients and service users.

65% of staff in the 2022 Staff Survey stated that they would recommend the Trust as a place to work.

66% of staff in the 2022 Staff Survey state that if a friend or relative needed treatment they would be happy with the standard of care provided by the Trust.

Highlights from most recent People Pulse survey The Bulletin - People-Pulse-Survey-Jan-2023.pdf - All Documents (sharepoint.com) show that 84% of respondents stated that colleagues helped one another, 60% stated that the Trust was proactive in supporting their health and wellbeing. 83% stated they felt that they could approach their manager to talk about flexible working. | 2 | |
| **Domain 2: Workforce health and well-being overall rating** | | | 8 | |

Domain 3: Inclusive leadership

Domain	Outcome	Evidence	Rating	Owner (Dept/Lead)
Domain 3: Inclusive leadership	3A: Board members, system leaders (Band 9 and VSM) and those with line management responsibilities routinely demonstrate their understanding of, and commitment to, equality and health inequalities	1. The Equality, Diversity and Inclusion Steering Group takes place monthly and is chaired by the Executive Director of Workforce and Organisational Development. A wide range of staff attend the meeting from localities, CBUs and Staff Networks. The meeting regularly has guest speakers, addresses Trustwide EDI actions and priorities, and receives updates from colleagues with regards to EDI work ongoing 2. The People Committee (Board Sub-Committee) receives monthly updates from the Equality, Diversity & Inclusion Steering Group and feeds updates through to monthly Trust Board meetings. 3. Active Executive Director attendance or support at Trust events such as Pride, LGBT+ History Month, Black History Month, Disability Leadership Courses etc. 4. Each staff network has an executive sponsor, a time allowance for co-chairs, and a network budget.	2	

	3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed	1. Board and senior-level meeting papers include 'risks identified' section 2. Quality Account / Quality Priorities – EDI has been part of the Quality Account for the past three years and is reported on Quarterly. 3. Gender Pay Gap is discussed at Board each year. 4. EDI Annual Report is received by Board each year. 5. WRES / WDES findings and action plan is presented and agreed at Trust Board each year.	2	
	3C: Board members and system leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff and patients	1. Quality Account / Quality Priorities – EDI has been part of the Quality Account for the past three years and is reported on Quarterly. 2. Gender Pay Gap is discussed at Board each year. 3. EDI Annual Report is received by Board each year. 4. WRES / WDES findings and action plan is presented and agreed at Trust Board each year.	2	
Domain 3: Inclusive leadership overall rating			6	
Third-party involvement in Domain 3 rating and review				
Trade Union Rep(s):		**Independent Evaluator(s)/Peer Reviewer(s):**		

EDS Organisation Rating (overall rating): **19**
Organisation name(s): Cumbria, Northumberland, Tyne & Wear NHS Foundation Trust
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**

- The EDS 2022 Action Plan is being developed in accordance to the EDS findings, and is being incorporated into the Equality, Diversity & Inclusion (EDI) Action Plan for 2023-24.
- The EDI Action Plan 2023-24 is currently being finalised and will be submitted to People Committee in July 2023.

Patient Equality Team
NHS England and NHS Improvement
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