

Equality and Diversity Council Meeting Paper

30th October 2014

EDS2 Subgroup

Purpose and context

The Equality and Diversity Council (EDC) and NHS England have set an aspiration of 95 per cent implementation of the EDS across the NHS by March 2016. The work of the *EDS2* Subgroup is focused upon meeting this aspiration and monitoring EDS uptake from across the system. Supporting NHS organisations with EDS2 implementation is key to the work of the subgroup.

Following the 29 September meeting of the Equality and Diversity Council's EDS2 subgroup, this paper provides an update on EDS activity and developments currently underway.

Background

Under three years ago, the EDS was borne out of a necessity to make inroads into poor NHS performance on equality in many key areas of service for patients and staff across all protected characteristics. It was devised as a result of significant and lengthy engagement with patients, carers, community groups, staff, staff-side organisations, major system leaders within and external to the NHS, as well as with the Government Equalities Office and the Equality and Human Rights Commission.

Since its original launch in late 2011, the EDS has been subject to a number of surveys and evaluations, including the independent evaluation of the EDS carried out by Shared Intelligence during 2012/13. The evaluation used a robust methodology that included a survey of 203 NHS organisations, follow-up interviews with equality leads in NHS provider and commissioner organisations as well as in-depth case studies and site visits to a range of different types of NHS organisations.

The evaluation aimed to establish a picture of EDS take-up and the experiences of different organisations across the country of implementing the EDS. The findings of the evaluation indicated that the EDS promoted engagement with stakeholders, helped organisations to meet legal obligations and indicated initial positive outcomes for patients and staff. The challenges were around the EDS being viewed as bureaucratic, and the outcomes and grading difficult to grasp.

The re-launch of the EDS in 2013 was based on both the findings of the independent evaluation and on in-depth engagement with those actually using the EDS. EDS2 is more streamlined and simpler to use compared to the original EDS. There are many common features between the two, therefore, organisations are encouraged to migrate from the original EDS to EDS2 at a time and pace that is appropriate. Organisations are encouraged to adopt but adapt EDS2 to local circumstances.

The main purpose of the EDS was, and remains, to help NHS organisations, in discussion with local partners including local people and NHS staff, to review and improve their performance for people with characteristics protected by the Equality Act 2010. By using the EDS/EDS2, NHS organisations are also helped to deliver on the Public Sector Equality Duty.

Action taken to date and current position

Following the NHS reforms, the EDC was refreshed and re-established in November 2013, and has taken on the joint governance arrangements for *EDS2* with NHS England. The *EDS2* subgroup – composed of EDC members and NHS colleagues – has agreed the strategic and practical actions that will help support the further uptake and implementation of the system.

1. Monitoring implementation and sharing good practice

During the summer of 2014, NHS England conducted a survey of all Clinical Commissioning Groups (CCGs) and NHS provider organisations in order to obtain an up-to-date picture of *EDS* implementation across the NHS. Each NHS organisation was sent a short survey asking whether or not it was implementing the *EDS* or *EDS2*.

To validate the survey findings for NHS providers, the website of each NHS provider was reviewed during September 2014. The audit of *EDS/EDS2* uptake shows that:

- 99% (209/211) of all CCGs in England are using the *EDS* or *EDS2*
- 93% (224/241) of all NHS providers are using the *EDS* or *EDS2*

All but two CCGs were implementing the *EDS/EDS2*. This high percentage may well be attributed to the alignment of the *EDS/EDS2* within CCG Authorisation and CCG Assurance processes. There was a wider variation in usage amongst NHS providers, with *EDS/EDS2* uptake percentages ranging from 84% in London to 96% in the Midlands and East region. The take-up of the *EDS* by provider organisations is in my view attributable to the way in which the CQC look for use of the *EDS*, and evidence from it, as part of their inspection activities. See below for more details.

It is important to note that within the 7% of NHS providers not using the *EDS/EDS2*, there are some organisations that have declared basing their strategic approach to equality upon the 'principles of the *EDS*'.

The national *EDS* Dashboard is being developed by NHS England and is scheduled to go 'live' during October 2014. The Dashboard will help monitor the uptake of the *EDS/EDS2* over time and will include, amongst other things, case studies on good *EDS2* implementation and the outcomes for patients and the workforce as a result of using the *EDS/EDS2*. The Case studies are being completed by NHS organisations across the country and will be showcased to facilitate the sharing of good practice examples and learning across the country.

2. System alignment

At the heart of *EDS2* are 18 outcomes, against which NHS organisations assess and grade themselves, in partnership with their stakeholders. These outcomes relate to issues that matter to people who use, and work in, the NHS. Among other things they support the themes of, and deliver on, the NHS Outcomes Framework, and the NHS Constitution.

- The *EDS* was built into the CCG authorisation process during 2012/13 and, more recently, *EDS2* has been embedded within NHS England's CCG Assurance Framework CCG for 2014/15.
- Extensive work has been carried out with the Care Quality Commission (CQC) on aligning and embedding *EDS2* within CQC's new inspection regime. *EDS2* features within the pre-inspection data-packs for CQC inspectors and within the sector-wide CQC handbooks. The 18 *EDS2* outcomes are matched to CQC's five key questions (safe, effective, caring, responsive, and well-led).
- During 2014, *EDS2* was successfully embedded within the Trust Development Authority's Planning Guidance for NHS Trust Boards 2014/15 to 2018/19.

- EDS2 is designed to help organisations deliver on the Public Sector Equality Duty (PSED). Extensive work was carried out with both the Government Equalities Office (GEO) and the Equality and Human Rights Commission (EHRC) and the Department of Health's solicitors, during the design of the EDS. Both GEO and the EHRC endorsed the EDS and provided quotes to be included in its policy document.

When reviewing NHS providers' websites during September 2014, an interesting observation was made. The majority of NHS providers not using the EDS/EDS2 were basing their strategic approaches to equality upon dated equality legislation with no mention of the Equality Act 2010 and the PSED. A very small number of NHS providers not using the EDS/EDS2 did appear to have a grip on equality matters, but these are an exception to the general rule.

3. Outcomes for patients and the workforce

Regular feedback from NHS organisations indicates positive outcomes that are already emerging for both patients and the NHS workforce as a result of implementing the EDS/EDS2. Some of the many examples of EDS outcomes include:

- Improvements in access to health care services for hard-of-hearing people (County Durham and Darlington NHS FT)
- Ensuring services are designed, commissioned and procured whilst taking account the needs of seldom heard groups (North East Commissioning Support)
- Improved access to cancer screening for the Learning Disabled community (Derbyshire Healthcare NHS FT)
- Improving access to services for visually impaired patients (Blackpool CCG)
- Improving access to health care services for the Roma community (Derby Hospitals)
- Setting up of a 'Local Public Equality Delivery Partnership' improving maternity services through patient engagement (East Lancashire CCG)
- Development of a 'Ethnic Minority Staff Strategy' (North East London NHS FT)
- Development of a 'Flexible Working Policy' (Derbyshire Healthcare NHS FT)
- Reduction in BME disciplinary action by 50% (Southern Healthcare)
- Recruitment of people with Learning Disabilities within the NHS (South Devon Healthcare NHS FT)
- Establishing 'Staff & Community Gender Identity Network' (Newcastle Upon Tyne NHS FT)

4. EDS2 and the proposed Workforce Race Equality Standard

The EDS and the proposed Workforce Race Standard are complimentary and will support each other. EDS2 can work with the Standard to promote positive workforce experience and improved representation at senior levels for BME staff. In the early days of the EDS, discussions were held with Stonewall about the link between the Stonewall Workplace Equality Index and the EDS. It was concluded that both processes could support and strengthen each other.

It's that sort of thinking that should be brought to bear as the proposed Standard is tested, developed and used. Indeed, the high level of traction that the EDS has across the country, would be of great benefit when rolling-out and implementing the proposed Standard.

EDS2 provides scope for NHS England to identify and announce one EDS2 outcome or area where it believes a particular concerted national effort is required for the NHS to improve its equality performance. For 2015/16 this area can be '*workforce race equality*'. The EDS2 document also states that guidance and support for the delivery on this outcome will be provided, and good practice shared.

Key risks

- The implementation of *EDS2* amongst NHS organisations across the country decreases and remains below the 95 per cent aspiration for 2015/16.
- A proven vehicle for helping to improve NHS equality performance will be under-used.

Next steps

- To finalise and make 'live' the EDS Dashboard to facilitate the sharing of good practice and outcomes, and the monitoring of EDS implementation levels.
- NHS England and Health Education England to develop 'Equality' and '*EDS2*' e-learning packages for the NHS workforce.
- To continue to support the alignment between *EDS2* and the proposed Workforce Race Equality Standard.

Recommendation and action requested

For the EDC to note the above cited progress to date.

Tom Cahill

On behalf of the *EDS2* Subgroup of the EDC

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