NHS England

NHS Equality Delivery System 2022
EDS Ratings and Score Card Guidance

For service users, patients, staff, stakeholders and leaders of the NHS

Version 2, 3 April 2023

Contents

Equality Delivery System (EDS) ratings

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 with the EDS Technical Guidance document[1].

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 inequalities in health access, experiences, impact and outcomes through three domains: Services, Workforce health and Wellbeing and leadership. It is driven by data, evidence, engagement and insight and has been amended to be brought into line with the NHS Long Term Plan, and in response to COVID-19.

The EDS Ratings and Score Card supporting guidance provides information on how to score and weight evidence produced for the eleven outcomes across the three EDS domains, leading to an overall EDS rating for the organisation. The definitions column provides a benchmark for evidence submitted.

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[1] https://future.nhs.uk/EHIME/view?objectID=119804773

Protected characteristics

When rating the Domain 1 and Domain 2 outcomes, NHS organisations and their stakeholders should refer to each of the nine characteristics given protection under the Equality Act 2010. The nine Protected Characteristics are:

- Age
- Disability
- Gender reassignment
- *Marriage and civil partnership
- Pregnancy and maternity (and paternity)
- Race
- Religion or belief
- Sex
- Sexual orientation

The protected characteristic of 'Marriage and civil partnership' was intended by the Equality Act 2010 to apply to employment only and is not covered by the Public Sector Equality Duty.

Details on the protected characteristics have been set out by the Equality and Human Rights Commission.[2] NHS organisations are asked to include this protected characteristic in their review. NHS organisations can also engage with carers and inclusion health groups[3] when implementing the EDS. By including people who are 'carers' or 'socially excluded' as specific groups to engage with, related health inequalities can be addressed.

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[2] https://www.equalityhumanrights.com/en/equality-act/protected-characteristics
[3] Inclusion health is a term used to describe people who are socially excluded and experience multiple risk factors for poor health such as poverty, violence and complex trauma. This can include people who experience homelessness, drug and alcohol dependence, Gypsy, Roma and Traveller communities, sex workers, victims of modern slavery, refugees, asylum-seekers and undocumented migrants.

Domains and Outcomes

Below you will find the EDS domains and their 11 outcomes

Domain	Outcome
Domain 1: Commissioned or provided services	1A: Patients (service users) have required levels of access to the service
	1B: Individual patients (service user's) health needs are met
	1C: When patients (service users) use the service, they are free from harm
	1D: Patients (service users) report positive experiences of the service
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
	2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source
	2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source
	2D: Staff recommend the organisation as a place to work and receive treatment

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
	3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed
	3C: Board members, system and senior leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff and patients

Domain Stakeholder List

Below you will find a list of required stakeholders for each EDS Domain

Domain	Stakeholder list
Domain 1: Commissioned or provided services	Patients and Service Users Carers Local members of the public Community groups Chaplaincy Voluntary, Community and Social Enterprise organisations Lay members
Domain 2: Workforce health and well-being	Staff members Staff networks Trade unions Chaplaincy Freedom to Speak Up Guardians
Domain 3: Inclusive leadership	Independent Evaluators or Peer Reviewers Trade unions Staff networks

Sponsors, senior leaders and/or board members should be engaged and involved with each Domain

Scoring

Each outcome is to be scored based on the evidence provided. Once each outcome has a score, they are added together to gain domain ratings. Using the middle score out of the three services from Domain 1, domain scores are then added together to provide the overall score, or the EDS organisation rating. Ratings in accordance to scores are below. The scoring system allows organisations to identify gaps and areas requiring action

Undeveloped activity – **organisations score 0** for each outcome	Those who score **under 8,** adding all outcome scores in all domains, are rated **Undeveloped**
Developing activity – **organisations score 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 2** for each outcome	Those who score **between 22 and 30,** adding all outcome scores in all domains, are rated **Achieving**
Excelling activity – **organisations score 3** for most outcomes	Those who score **31 and above,** adding all outcome scores in all domains, are rated **Excelling**

EDS Domain 1: Commissioned or provided services

Outcome 1A: Patients (service users) have required levels of access to the service

Rating	Score	Description	Evidence
Underdeveloped activity	0	**No or little activity taking place**	Organisations/systems have little or nothing in place to ensure patients with protected characteristics have adequate and appropriate access to the services they require. Feedback from patients is not acted upon. Organisations have not identified barriers facing patients
Developing activity	1	**Minimal/ basic activities taking place**	Data and evidence to show relevant patients with higher risks due to a protected characteristic or at risk of health inequalities (50% of those using the service) have adequate access to the service. Patients consistently report fair or good (or the equivalent) when asked about accessing services. Demonstration that the organisation has identified barriers to accessing services

Achieving activity	2	**Required level of activity taking place**	Data and evidence to show relevant patients with higher risks due to a protected characteristic or at risk of health inequalities (75% of those using the service) have adequate access to the service. Patients consistently report good or very good (or the equivalent) when asked about accessing services. Demonstration that the organisation has identified barriers to accessing services
Excelling activity	3	**Activity exceeds requirements**	Data and evidence to show relevant patients with higher risks due to a protected characteristic or at risk of health inequalities (98% of those using the service) have adequate access to the service. Patients consistently report very good or excellent (or the equivalent) when asked about accessing services. Demonstration that the organisation has knowledge of barriers and have changed outcomes for people who experience those barriers in accessing services

Outcome 1B: Individual patients (service user's) health needs are met

Rating	Score	Description	Evidence examples
Underdeveloped activity	0	**No or little activity taking place**	Patients with higher risks due to a protected characteristic receive little or no support to self-manage care needs. The organisations do little or no engagement surrounding services.
Developing activity	1	**Minimal/ basic activities taking place**	Patients at higher risk due to a protected characteristic needs are met in a way that works for them. The organisations often consult with patients and the public to commission, de-commission and cease services provided.
Achieving activity	2	**Required level of activity taking place**	Patients at higher risk due to a protected characteristic needs are met in a way that works for them. The organisations often consult with patients with higher risks due to a protected characteristic to commission, designed, increase, decrease, de-commission and cease services provided. The organisations signpost to VSCE organisations and social prescribing. Personalised care is embedded into the care delivered for those with higher risks due to a protected characteristic by the organisations.

Excelling activity	3	Activity exceeds requirements	Patients at higher risk due to a protected characteristic and other groups at risk of health inequalities needs are met in a way that works for them.
			The organisations fully engage with patients, community groups, and the public, to commission, designed, increase, decrease, de-commission and cease services provided.
			The organisations work in partnership with VCSE organisations to support community groups identified as seldom heard. The organisations use social prescribing, where relevant. Personalised care is embedded into the care delivered for those with higher risks due to a protected characteristic by the organisations.
			The organisations work with, and influence partners, to improve outcomes for people with a protected characteristic and other groups at risk of health inequalities, across the system or where services connect

Outcome 1C: When patients (service users) use the service, they are free from harm

Rating	Score	Description	Evidence examples
Underdeveloped activity	0	**No or little activity taking place**	The organisation may or may not have mandated/ basic procedures/initiatives in place to ensure safety in services. Staff and patients are not supported when reporting incidents and near misses. The organisation holds a blame culture towards mistakes, incidents and near misses
Developing activity	1	**Minimal/ basic activities taking place**	The organisation has mandated/ basic procedures/initiatives in place to ensure safety in services. The organisation has procedures/initiatives in place to enhance safety in services for patients in protected characteristic groups.
Achieving activity	2	**Required level of activity taking place**	The organisation has procedures/initiatives in place to enhance safety in services for patients in all protected characteristic groups where there is known H&S risks. Staff and patients feel confident, and are supported to, report incidents and near misses. The organisation encourages an improvement culture giving consideration to equality and health inequality themes in safety incidents and near misses

Excelling activity	3	**Activity exceeds requirements**	The organisation has procedures/initiatives in place to enhance safety in services for all patients in protected characteristic groups where there is known H&S risks.
			Staff and patients are supported and encouraged to report incidents and near misses. The organisation encourages and promotes an improvement culture actively including equality and health inequality themes in safety incidents and near misses.
			The organisations work with system and community partners to improve safety outcomes for people, using existing data and driven by service need/risk

Outcome 1D: Patients (service users) report positive experiences of the service

Rating	Score	Description	Evidence examples
Underdeveloped activity	0	**No or little activity taking place**	The organisations do not engage with patients about their experience of the service. The organisations do not recognise the link between staff and patient treatment. The organisations do not act upon data or monitor progress.
Developing activity	1	**Minimal/ basic activities taking place**	The organisations collate data from patients with protected characteristics about their experience of the service. The organisation creates action plans, and monitors progress.
Achieving activity	2	**Required level of activity taking place**	The organisations collate data from patients with protected characteristics about their experience of the service. The organisations create evidence-based action plans in collaboration with patients and relevant stakeholders, and monitors progress. The organisation shows understanding of the link between staff and patient treatment and demonstrate improvement in patient experiences

Excelling activity	3	**Activity exceeds requirements**	The organisation actively engages with patients with protected characteristics and other groups at risk of health inequalities about their experience of the service.
			The organisation actively works with the VCSE to ensure all patient voices are heard. The organisations create data driven/evidence-based action plans, and monitors progress.
			The organisation shows understanding of the link between staff and patient treatment. The organisations use patient experience data to influence the wider system and build interventions in an innovative way.

EDS Domain 2: Workforce health and well-being

Outcome 2A: When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions

Rating	Score	Description	Definition
Underdeveloped activity	0	No or little activity taking place	The organisation does not consider the health of its workforce. The organisation does not engage with staff about self-management of the mentioned conditions. The organisation does not widely/regularly communicate about available support to staff about health conditions
Developing activity	1	Minimal/ basic activities taking place	The organisation targets reading materials about the mentioned health conditions to staff about the mentioned conditions. The organisation promotes work-life balance. The organisation signposts to national support.
Achieving activity	2	Required level of activity taking place	The organisation monitors the health of staff with protected characteristics. The organisation promotes self-management of conditions to all staff. The organisation uses sickness and absence data to support staff to self-manage long term conditions and to reduce negative impacts of the working environment. The organisation provides support to staff who have protected characteristics for all mentioned conditions. The organisation promotes work-life balance and healthy lifestyles. The organisation signposts to national and VSCE support.

Excelling activity	3	Activity exceeds requirements	The organisation monitors the health of all staff. The organisation supports all staff to actively manage their conditions via various methods.
			The organisation uses sickness and absence data to support staff to self-manage long term conditions and to reduce negative impacts of the working environment. The organisation actively works to increase health literacy within its workforce.
			The organisation promotes and provides innovative initiatives for work-life balance, healthy lifestyles, encourages and provides opportunity to exercise. The organisation signposts to national and VSCE support. The organisation uses data to support their workforce in making healthy lifestyle choices.

Outcome 2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source

Rating	Score	Description	Definition
Underdeveloped activity	0	**No or little activity taking place**	The organisation does not support staff who have been verbally and physically abused. The organisation rarely or does not penalise staff who abuse or bully other members of staff. Staff are not supported to report patients who verbally or physically abuse them.
Developing activity	1	**Minimal/ basic activities taking place**	The organisation acts and supports staff who have been verbally and physically abused. The organisation acts to penalise staff who abuse or bully other members of staff. Staff are supported to report patients who verbally or physically abuse them.
Achieving activity	2	**Required level of activity taking place**	The organisation has a zero-tolerance policy for verbal and physical abuse towards staff. The organisation penalises staff who abuse, harass or bully other members of staff and takes action to address and prevent bullying behaviour and closed cultures, recognising the link between staff and patient experience Staff with protected characteristics are supported to report patients who verbally or physically abuse them. The organisation provides appropriate support to staff and where appropriate signposts staff to VSCE organisations who provide support for those who have suffered verbal and physical abuse.

| Excelling activity | 3 | **Activity exceeds requirements** | The organisation has and actively implements a zero-tolerance policy for verbal and physical abuse towards staff. The organisation penalises staff who abuse, harass or bully other members of staff and takes action to address and prevent bullying behaviour and closed cultures, recognising the link between staff and patient experience. Staff with protected characteristics are supported to report and refuse treatment to patients who verbally or physically abuse them.

The organisation provides appropriate support to staff and where appropriate works with VSCE organisations to provide support for those with protected characteristics who have suffered verbal and physical abuse.

The organisations can provide evidence that percentages for bullying and harassment are decreasing year on year for any staff group were there are higher than average incidents.

The organisations use evidence from people's experiences to inform action and change and influence other system partners to do so |
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Outcome 2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source

Rating	Score	Description	Definition
Underdeveloped activity	0	**No or little activity taking place**	The organisation has mandated staff support available. The organisation does not have active staff networks in place.
Developing activity	1	**Minimal/ basic activities taking place**	Freedom to Speak Up guardians are embedded in the organisation. Relevant staff networks are active and accessible. Staff support available via channels provided by NHS England.
Achieving activity	2	**Required level of activity taking place**	The organisation supports union representatives to be independent and impartial. Freedom to Speak Up guardians are embedded. Relevant staff networks are active, accessible and staff led. Equality impact assessments are applied when amending or creating policy and procedures for reporting abuse, harassment, bullying and physical violence. Support is provided for staff outside of their line management structure.

Excelling activity	3	**Activity exceeds requirements**	The organisation facilitates pooling union representatives with partner organisations, to encourage independence and impartiality.
			Freedom to Speak Up Guardians are embedded and empowered. Relevant staff networks are staff led, funded and provided protected time to support and guide staff who have suffered abuse, harassment, bullying and physical violence from any source.
			Relevant staff networks are engaged, and equality impact assessments are applied when amending or creating policy and procedures for reporting abuse, harassment, bullying and physical violence.
			Support is provided for staff outside of their line management structure. The organisation monitors, and acts upon, data surrounding staff abuse, harassment, bullying and physical violence.
			The organisations use evidence from people's experiences to inform action and change and influence other system partners to do so

Outcome 2D: Staff recommend the organisation as a place to work and receive treatment

Rating	Score	Description	Definition
Underdeveloped activity	0	**No or little activity taking place**	Over 50% of staff who live locally to services provided by the organisation do not/would not choose to use those services. Over 50% of staff who live locally are unhappy and would not recommend the organisation as a place to work. The organisation does not compare the experiences of BAME, LGBT+ and Disabled staff against other staff members.
Developing activity	1	**Minimal/ basic activities taking place**	Over 50% of staff who live locally to services provided by the organisation do/would choose to use those services. Over 50% of staff who live locally are happy and regularly recommend the organisation as a place to work. Over 50% of staff who live locally to services provided by the organisation would recommend them to family and friends. The organisation collates and compares the experiences of BAME, LGBT+ and Disabled staff against other staff members.
Achieving activity	2	**Required level of activity taking place**	Over 70% of staff who live locally to services provided by the organisation do/would choose to use those services. Over 70% of staff who live locally are happy and regularly recommend the organisation as a place to work. Over 70% of staff who live locally to services provided by the organisation would recommend them to family and friends. The organisation uses sickness and absence data to retains staff. The organisation uses data from end of employment exit interviews to make improvements. The organisation collates and compares the experiences of BAME, LGBT+ and Disabled staff against other staff members, and acts upon the data.

Excelling activity	3	Activity exceeds requirements	Over 85% of staff who live locally to services provided by the organisation do/would choose to use those services.
			Over 85% of staff who live locally are happy and regularly recommend the organisation as a place to work. Over 85% of staff who live locally to services provided by the organisation would recommend them to family and friends.
			The organisation uses sickness and absence data to retain staff, with a staff retention plan in place. The organisation uses data from end of employment exit interviews to make improvements.
			The organisation collates and compares the experiences of BAME, LGBT+ and Disabled staff against other staff members, and acts upon the data. The organisation works with partner organisations to better the experiences of all staff.

EDS Domain 3: Inclusive leadership

Outcome 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**

Rating	Score	Description	Definition
Underdeveloped activity	0	**No or little activity taking place**	Equality and health inequalities is never or rarely discussed in board and committee meetings.
			Board members and senior leaders have no or little engagement with staff networks.
			Board members and senior leaders show no or little interest in religious, cultural or local events and/or celebrations. Board members and senior leaders do little or no engagement with, and/or communications to, staff about health inequalities, equality, diversity and/or inclusion.
Developing activity	1	**Minimal/ basic activities taking place**	Both equality and health inequalities are discussed in board and committee meetings.
			Board members and senior leaders have at least yearly/twice yearly engagement with staff networks.
			Board members and senior leaders acknowledge religious, cultural or local events and/or celebrations. Board members and senior leaders engage with staff about equality, diversity and/or inclusion only.

Achieving activity	2	**Required level of activity taking place**	Both equality and health inequalities are standing agenda items and discussed in board and committee meetings.
			Board members and senior leaders meet staff networks at least 3 or more times a year. Staff networks have a senior sponsor.
			Board members hold services to account, allocate resources, and raise issues relating to equality and health inequalities on a regular basis.
			Board members and senior leaders engage in religious, cultural or local events and/or celebrations. Board members implement the Leadership Framework for Health Inequalities Improvement.
			Board members and senior leaders demonstrate commitment to health inequalities, equality, diversity and inclusion.
Excelling activity	3	**Activity exceeds requirements**	Both equality and health inequalities are standing agenda items in all board and committee meetings. Board members and senior leaders meet frequently with staff networks.
			Staff networks have more than one senior sponsor. Board members and senior leaders sponsor religious, cultural or local events and/or celebrations. Board members and senior leaders enable underserved voices to be heard
			Board members hold services to account, allocate resources, and raise issues relating to equality and health inequalities on a regular basis.
			Board members implement the Leadership Framework for Health Inequalities Improvement. Board members and senior leaders demonstrate commitment to health inequalities, equality, diversity and/or inclusion. Board members and senior leaders actively communicate with staff and/or system partners about health inequalities, equality, diversity and inclusion.

Outcome 3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed

Rating	Score	Description	Definition
Underdeveloped activity	0	**No or little activity taking place**	Equality and health inequalities are never or rarely discussed in board and committee meeting. Actions associated with health inequalities are not recorded or reported on. Equality impact assessments are not or rarely completed.
Developing activity	1	**Minimal/ basic activities taking place**	Both equality and health inequalities are discussed in some board and committee meeting. Actions associated with equality and health inequalities are recorded and reported on. Equality and health inequalities impact assessments are completed for some projects and policies and are signed off at senior level. BME staff risk assessments are completed.
Achieving activity	2	**Required level of activity taking place**	Both equality and health inequalities are standing agenda items in some board and committee meetings. Equality and health inequalities impact assessments are completed for all projects and policies and are signed off at the appropriate level where required. BME staff risk assessments are completed. Required actions and interventions are measured and monitored.

Excelling activity	3	**Activity exceeds requirements**	Both equality and health inequalities are standing agenda items in all board and committee meetings.
			Equality and health inequalities impact assessments are completed for all projects and policies and are signed off at the appropriate level where required.
			Staff risk assessments, specific to those with protected characteristics, are completed and monitored (***where relevant***).
			Required actions and interventions are measured and monitored. The WRES, WDES and/or NHS Oversight and Assessment Framework are used to develop approaches and build strategies.
			Equality and health inequalities are reflected in the organisational business plans to help shape work to address needs

Outcome 3C: Board members, system and senior leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff and patients

Rating	Score	Description	Definition
Underdeveloped activity	0	**No or little activity taking place**	Board members, system and senior leaders do not show commitment to the **relevant** below tools. Board members, system and senior leaders do not monitor the implementation of the below tools: WRES, WDES, EHI Impact Assessments, Gender Pay Gap reporting, Accessible Information Standard, PCREF (Mental Health), EDS 2022
Developing activity	1	**Minimal/ basic activities taking place**	Board members, system and senior leaders ensure the implementation of the **relevant** below tools. Board members, system and senior leaders monitor the implementation of the below tools: WRES, WDES, EHI Impact Assessments, Gender Pay Gap reporting, Accessible Information Standard, PCREF (Mental Health), EDS 2022

Achieving activity	2	**Required level of activity taking place**	Board members, system and senior leaders ensure the implementation and monitoring of the relevant below tools. Interventions for unmet goals and objectives are present for the relevant below tools.
			Those holding roles at AFC Band 8C and above are reflective of the population served
			Organisations are able to show year on year improvement using Gender Pay Gap reporting, WRES and WDES. Board members, system and senior leaders monitor the implementation and impact of actions required and raised by the below tools:
			WRES (including Model Employer), WDES, Impact Assessments, Gender Pay Gap reporting, Accessible Information Standard, end of employment exit interviews, PCREF (Mental Health), EDS 2022

Excelling activity	3	Activity exceeds requirements	Board members, system and senior leaders ensure the implementation and monitoring of the relevant below tools.
			Interventions for unmet goals and objectives are present for the relevant below tools. Board members, system and senior leaders actively support those experiencing the menopause within the working environment. Organisations work with system partners to refocus work, to meet unmet need and demonstrates change
			Those holding roles at AFC Band 7 and above are reflective of the population served
			Organisations are able to show year on year improvement using Gender Pay Gap reporting, WRES and WDES. Board members, system and senior leaders monitor the implementation and impact of actions required and raised by the below tools:
			WRES (including Model Employer), WDES, NHS Oversight and Assessment Framework, Impact Assessments, Gender Pay Gap reporting, staff risk assessments (for each relevant protected characteristic), SOM, end of employment exit interviews, PCREF (Mental Health), EDS 2022, Accessible Information Standard, partnership working – Place Based Approaches

EDS Organisation Rating (overall rating)

Organisations are required to provide an organisation rating, created by adding outcome scores together. Using the middle score out of the three services from Domain 1, domain scores are added together to provide the organisation rating. Below is a key to support understanding of organisation rating:

Those who score **under 8,** adding outcome scores across domains, are rated **Undeveloped**

Those who score **between 8 and 21,** adding outcome scores across domains, are rated **Developing**

Those who score **between 22 and 30,** adding outcome scores across domains, are rated **Achieving**

Those who score **31 and above,** adding outcome scores across domains, are rated **Excelling**