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NHS Equality Delivery System 2022 EDS Reporting Template

Version 1, 15 August 2022

Contents

Equality Delivery System for the NHS.....	2
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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	Locala Health & Wellbeing CIC	Organisation Board Sponsor/Lead		
Name of Integrated Care System	West Yorkshire ICB	Mary Wishart, Director of Strategy and Partnerships		

EDS Lead	Sarah True, Head of Engagement & Involvement		At what level has this been completed?	
				*List organisations
EDS engagement date(s)	4, 11, 15 December 2023 20 February 2024		Individual organisation	
			Partnership* (two or more organisations)	Yorkshire Ambulance Service Mid Yorkshire Hospitals NHS Trust Calderdale & Huddersfield Foundation Trust, West Yorkshire ICB – Kirklees, Wakefield, Calderdale Place
			Integrated Care System-wide*	

Date completed	20 February 2024	Month and year published	29 February 2024
Date authorised	28 February 2024	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

Service 1: Perinatal Mental Health – Health Visiting Team			
Outcome	Evidence	Rating	Owner (Dept/Lead)
1A: Patients (service users) have required levels of access to the service	<ul style="list-style-type: none"> • Waiting list – Every parent that has a baby is accepted onto the case load if they live in Kirklees or Calderdale. Parents are all treated individually to ensure that their needs are met. There is no waiting lists • It's a free service. Travel to appointments if outside of the home are always considered. • Young people (teenage parents) would be offered the same service as all new parents If it was identified that additional support was required, this would be put in place or referred to appropriate organisation. • Referral information – always from midwives. LD should be highlighted on the documentation but if not, the conversation will happen in the antenatal visit when the Accessible information box appears on the system one record. This is when reasonable adjustments will start if required. • A named Health visitor is allocated antenatally. They will assess the needs of the family and support the family for up to 5 yrs. All communication comes back to this HV if seen elsewhere and recorded on System 1. • Appointments made by telephone calls and reminded by SMS – letters only used if unable to contact the family. All Letters include gender inclusive language. • visit schedule: 	Developing	Clinical Lead

Service 1: Perinatal Mental Health – Health Visiting Team			
Outcome	Evidence	Rating	Owner (Dept/Lead)
	<p>Antenatal contact Birth Visit (10-14 days) 6–8-week contact (wellbeing assessed) 3–4-month contact (weaning) Pre one year assessment Extra visits added where required. If a parent is highlighted as having known MH needs, there is an additional visit at 25 weeks pregnancy and then again at 34 weeks pregnant.</p> <ul style="list-style-type: none"> • Throughout the child’s 0-5 years the family would be signposted to appropriate partners if we could not meet need in service with our skills. • Services are offered in the family home or in a local centre – travel is considered, and cost attached to this where possible. • Contact with service is via telephone or Chat health 24/7 although duty team available 9 until 5 pm for response locala.org.uk/chathealth/ • Days of worship considered along with religious festivals. All discussed in the initial call. • All colleagues complete annual mandatory Equality, Diversity and Inclusion Training. <p>The service can book Interpreters when required. Female interpreters will always be booked unless there are no alternative options. For fathers a male interpreter would be booked</p>		

Service 1: Perinatal Mental Health – Health Visiting Team			
Outcome	Evidence	Rating	Owner (Dept/Lead)
1B: Individual patients (service users) health needs are met	<ul style="list-style-type: none"> • Midwifery and Locala have service leads in Perinatal mental health. We work closely with SWYFT who have a specific Perinatal Mental health team. There is a Perinatal Mental Health pathway. Monthly multi agency liaison group meetings to discuss families with increased need for perinatal mental health support, this includes a Locala colleague. • All care and support is person-centred and based on patient need. • Details/ information regarding the parent and family are captured on System 1 in a template called a universal needs assessment. A holistic assessment is carried out in which the family are involved. The wider health and social context considered. • Dad’s mental health and wellbeing is also discussed – if a need is identified they can be referred on to ‘Talking therapies’ or ‘vitaminds’ who provide not gender specific therapy. • Getting ready for baby sessions available to all families. Self-referral. A Recent example is the service booked a BSL translator for a father that was deaf. This provision was in place over the 6-week course at every session. • Day time sessions have just been introduced for families that have a vulnerability. Although uptake is low. • During the Antenatal visit maternal mental health is discussed for the first time. The topic is assessed throughout the first 1 year even if the parent does not suggest that they are having problems the HV would be monitoring it using their professional judgment. If low mood was suspected, we would 	Developing	Clinical Lead

Service 1: Perinatal Mental Health – Health Visiting Team			
Outcome	Evidence	Rating	Owner (Dept/Lead)
	<p>do the GAD 7 PHQ9 screening to support any work in place at home or with other services.</p> <ul style="list-style-type: none"> • Missed appointments: If a family were out when we attended the property to visit a letter would be put through the door – depends on visit type and age of child as to whether another visit organised. Final letter sent if no contact is made from the family to rearrange. If safeguarding concern, then appropriate communication would be made to share with all agencies. If the appointment is for an antenatal visit then communication would happen with midwifery. We also have access to midwifery records so can review and manage appropriately. • Friends and Family Test reviewed monthly by the engagement team. We have easy read versions of this survey if required. The service receives around 100 pieces of feedback a month. This feedback is shared with the team directly. The Engagement team identify any themes and raise up through the organisation to ensure learning shared and improvements made • Reasonable adjustments/ Accessible Information Standard; The service have access to Interpreters and translators and do their best to ensure that this is a female as sensitive and personal topics are discussed • All non-English speaking families get a face-to-face home visit with interpreter service if required. • Details for the service are all on the Locala website including contact details 		

Service 1: Perinatal Mental Health – Health Visiting Team			
Outcome	Evidence	Rating	Owner (Dept/Lead)
1C:When patients (service users) use the service, they are free from harm	<ul style="list-style-type: none"> • Safeguarding incidents are managed by the Safeguarding team and the named Health visitor – learning documents from serious case reviews are shared across the organisation to promote learning and improvements if required. • Locala has a Safeguarding team who are available to support all Locala colleagues and volunteers’ team with adult or child protection. • Multi agency safeguarding training is available for colleague to book when required at least one session a year. • Locala colleagues have a close relationship with social care for safeguarding and LD support this ensures that communication and updates are shared often. Locala’s Autism and Learning Disability lead also has many connections to support these families in our local areas. • The team have access to an Easy read pack for LD - available to all Health visitors - Contains easy read resources that the HV will read through and use as prompts in visits. The pack allows a slower paced visit with additional resources to promote understanding. The family keep the pack which has charts to remind when immunisations are due and contact numbers for the HV etc. These families would be receiving additional support (extra visits and contacts). The pack was developed with some Queens Nurse funding and has been created in partnership with local support groups and families with lived experience. 	Achieving	Head of Safeguarding

Service 1: Perinatal Mental Health – Health Visiting Team			
Outcome	Evidence	Rating	Owner (Dept/Lead)
	<p>General training available to all 0-5 practitioners.</p> <ul style="list-style-type: none"> - Accessible Information Standard Policy and training available to colleagues - LD & Autism lead Nurse in post - Equality and diversity training - Clinical Supervision is available to all colleagues. - Quarterly networking and training sessions including learning pieces and multi-agency supervision. - All cases that are flagged as universal plus are monitored and supervised by the Perinatal Mental health lead 		
1D: Patients (service users) report positive experiences of the service	<ul style="list-style-type: none"> • Healthwatch Calderdale and Kirklees are notified of any themes and concerns we have with services- Health watch contact us if they identify any themes and share all Locala feedback with the service. Nothing to report in the previous 3 years. • PALS enquiries: 3 complaints, 4 concerns, 22 PALS, 7 compliments – all shared monthly with the team and Engagement team • The PHEYS service have a bespoke survey, this is the link to the questions: https://www.smartsurvey.co.uk/s/VN1MR/ 	Developing	Head of Involvement

Service 1: Perinatal Mental Health – Health Visiting Team			
Outcome	Evidence	Rating	Owner (Dept/Lead)
	<p>Engagement champion: the service has a champion role that attends a workshop twice a year to talk about all thing engagement. Learning is shared.</p> <p>Service improvements</p> <ol style="list-style-type: none"> 1. Health Visitors introduced QR code to collect feedback after the Getting ready for baby sessions, this was a suggestion made by families to speed up the process when sharing experience- this improvement is also easier for people that have LD as they do not have to copy a complicated URL. 2. A new SMS was created that is sent to families with children due a 2year development check. Parents were contacting the service feeling anxious that they had missed the appointment or been missed, as this assessment is not completed until 2 years 6 months. 3. A dad got in touch to say that the letters that are sent out to invite to assessments and appointments do not feel very inclusive of dads or carers. We reviewed all letters to ensure that we referred to Parental Mental health not Maternal and to ensure we invited parents and carers also not just mothers. We also reviewed all the health assessment templates on our systems to include fathers as well as mothers. <p>Emotional wellbeing visits – are coming soon. The team will have a specific dad's worker. The service has been named by families locally and ideas and suggestions of how the service should function have been suggested.</p>		

Service 1: Perinatal Mental Health – Health Visiting Team			
Outcome	Evidence	Rating	Owner (Dept/Lead)
	This team will offer support to families that need just that little bit more support. Specific criteria, detailed programme of support, can be accessed at any stage in the perinatal mental health period. Focus on early intervention and attachment.		

Service 2: Children & Young People's Mental Health – Children's Physio and OT Teams			
Outcome	Evidence	Rating	Owner (Dept/Lead)
1A: Patients (service users) have required levels of access to the service	<ul style="list-style-type: none"> • Appointments are at home, school, nursery and at the Children's Centre an accessible building located at Dewsbury Hospital (CDC) • The service has an up-to-date and comprehensive section on the Locala website, complete with referral information, useful links and information about the service • The service can access translation services for all appointments in the home or clinic setting. Urdu and Punjabi speakers are within the team. • An Accessible Information Standard template is completed and reviewed every 6m. Any needs in terms of communication and information support are identified at the earliest possible opportunity and options are provided. For example, April to June 2023 data shows 14 patients were recorded as using Makaton, 1 parent requested letters in large print • The team are Makaton trained to meet the needs of patients • There is a maximum wait of 8 weeks to access the service – if urgent 2 weeks, the national guidance is 18 weeks • The team complete an Equality Impact Assessment every year to ensure the service is accessible for service users 	Achieving	Clinical Lead

Service 2: Children & Young People's Mental Health – Children's Physio and OT Teams			
Outcome	Evidence	Rating	Owner (Dept/Lead)
	<ul style="list-style-type: none"> • Team carry out regular training including Depression in Children and Young People Awareness, Safeguarding, Learning Disability and Autism, Equality & Diversity. • Locala has Learning Disability and Autism Lead and within the team there is a Learning Disability and Autism Champion. • A member of the team is a member of the Physiotherapy Union for Equality & Diversity. • After feedback from parents the signage at the Children's Development Centre has been improved • For a period of time the service was accessed by ringing a bell at the main door of the building. Parents preferred having contact at reception and were involved on the interview panel for the new receptionist. 		
1B: Individual patients (service users) health needs are met	<ul style="list-style-type: none"> • Locala's Physios and OT team provide holistic, patient centred care and support tailored to the needs of the patient. • Patients have a personalised can of care. • The team works with many local health, social care and community partners to support children, young people and their families. Eg Portage, (early years education team attend Stay & Play sessions). • Stay and Play sessions. Supportive sessions run during the school holidays for children and families attended by the play therapy lead with support from OT and Physio teams. 	Achieving	Clinical Lead

Service 2: Children & Young People's Mental Health – Children's Physio and OT Teams			
Outcome	Evidence	Rating	Owner (Dept/Lead)
	<ul style="list-style-type: none"> • Group Sessions/Peer Support - run by Physio and OT teams to allow access to increased intervention with the chance to meet others with similar physical needs. This allows them to see that they are not the only person who needs extra help or exercises to help with their physical needs. This has proved very popular with children and young people. The pre-5 years session parents/carers are also involved this gives them opportunity to meet other parents/carers has led to long term friendships and peer support. • Wheelchair Skills Event – the team hold an annual wheelchair skills event for young people and families. This hugely popular event provides a fun and supportive space for people to learn, share and support. • Up-to-date information about local support available is on the website and in waiting areas. • Physical activity groups – signposting and working alongside local clubs to develop bespoke sessions for young people on the caseload. • The team have close links with partners and provide signposting to onward support available • The team won the Clinical Team of the Year Award at Locala's Colleague Awards 2023 for their outstanding service to patients, families and carers. 		

Service 2: Children & Young People's Mental Health – Children's Physio and OT Teams			
Outcome	Evidence	Rating	Owner (Dept/Lead)
1C: When patients (service users) use the service, they are free from harm	<ul style="list-style-type: none"> • Locala's Safeguarding team are available to support the team with adult or child protection advice when required. • Multi agency safeguarding training is available for colleagues to book. At least one session a year must be attending. • There is a close relationship with social care for safeguarding and LD, this ensures that communication and updates are shared often. • Clinical Supervision is available to all colleagues. • Regular training including mandatory training to ensure up to date practices and adherence to professional standards and registration protocols. Training recorded on colleagues' electronic staff record (ESR) and in supervision and appraisal documentation. 	Developing	Head of Safeguarding
1D: Patients (service users) report positive experiences of the service	<ul style="list-style-type: none"> • Each team has a bespoke survey for patients and parents • Each team has an Engagement Champion who acts as a link between the Engagement Team and clinical team. They support key messages being shared at team meetings. • Each team has an annual Engagement Plan where engagement activities are recorded. • A 'easier to read' feedback form is available • Feedback data: Occupational Therapy 81 responses over 12 months 	Excelling	Head of Patient Experience

Service 2: Children & Young People's Mental Health – Children's Physio and OT Teams			
Outcome	Evidence	Rating	Owner (Dept/Lead)
	<p>97% of those who responded said the service was good/very good</p> <p>Physiotherapy 239 responses over 12 months 96% of those who responded said the service was good/very good</p> <ul style="list-style-type: none"> • The Engagement Team carry out an annual E&D review of responses to surveys to ensure the team are hearing from patients that represent the demographics of the service and local population. • Patient stories are prepared and shared across the organisation. The team ensure stories are representative of the local demographic. • Thank you cards and compliments are logged onto the Datix system and shared with the team • Details on how to complain are available within the clinic and the website has a video including BSL with details about how to complain. • The team are responsive to feedback with improvements made based on comments from parents and young people. • After feedback from parents and families about the decoration and style of the Children's Development Centre. Young people 		

Service 2: Children & Young People's Mental Health – Children's Physio and OT Teams			
Outcome	Evidence	Rating	Owner (Dept/Lead)
	<p>were asked to help design a new look for the building. They chose the colours, the accessories, soft play area, the world map mural etc.</p> <ul style="list-style-type: none"> • Positive feedback is shared on the website and our weekly 'Feedback Friday' social media posts. 		

Service 3: Intermediate Care Beds			
Outcome	Evidence	Rating	Owner (Dept/Lead)
1A: Patients (service users) have required levels of access to the service	<p>Demographic data for Intermediate Care Bed bases: Data showing age, ethnic group and sex of 692 patients admitted to Intermediate Care bed bases during the period April 2022 to October 2023.</p> <p>Age 35-40: 0.31% 41-60: 4.88% 61-80: 32.44% 81and older: 62.36%</p> <p>Ethnic group Asian: 2.36% Black: 1.10% Mixed: 0.31% Other: 0.47% Unspecified: 8.82% White: 86.93%</p> <p>Sex Male: 33.86% Female: 66.14%</p>	Achieving	Clinical Lead

Service 3: Intermediate Care Beds			
Outcome	Evidence	Rating	Owner (Dept/Lead)
1B: Individual patients (service users) health needs are met	<p>Equality Impact Assessment:</p> <p>Last completed October 2022 by Intermediate Care Team leaders and Engagement team. Demonstrates inclusive and respectful patient centred care. Actions – to continue with ‘Cultural and Religious’ project. To continue to listen to and learn from patients and to action as required.</p> <p>Accessible Information Standard:</p> <p>Data showing 97.3% of Intermediate Care bed base patients had ‘Communication Needs’ template completed on electronic health record during April to June 2023. This includes stating when patients who do not have a communication disability. 24 patients recorded as requiring support with communication, including 15 patient who use hearing aids and 1 patient who uses British Sign Language.</p>	Achieving	Clinical Lead
1C: When patients (service users) use the service, they are free from harm	<p>Colleague training and annual appraisal:</p> <p>Regular training including mandatory training to ensure up to date practices and adherence to professional standards and registration protocols. Training recorded on colleagues’ electronic staff record (ESR) and in supervision and appraisal documentation.</p>	Achieving	Head of Safeguarding

Service 3: Intermediate Care Beds			
Outcome	Evidence	Rating	Owner (Dept/Lead)
	<p>Regular communication</p> <ul style="list-style-type: none"> • Daily 'Safety Huddles' • Handovers twice a day • Weekly Multi -Disciplinary Meetings <p>Health colleagues and care staff communicate regularly regarding individual patients and raise any new health issues such as falls and urinary infections which may impact on patient safety. Plans put in place to reduce risks. Recorded on electronic health record and care plan.</p>		
1D: Patients (service users) report positive experiences of the service	<p>Your Views on Our Service survey results April 22-Oct 23</p> <p>Feedback results demonstrate 100% of 98 patients completed survey have had 'Very good' or 'Good' experience at the Intermediate Care Bed bases.</p> <p>Discharge Survey results</p> <ul style="list-style-type: none"> • January – September 2022 • January – September 2023 <p>Feedback results demonstrate that in 2022, not all patients felt that their cultural and religious needs had been respected whilst staying at the Intermediate Care Bed Bases – this seems to be mainly because patients had not been asked about their needs. 8 patients said their religious and cultural needs were 'never' respected.</p>	Achieving	Engagement Lead

Service 3: Intermediate Care Beds			
Outcome	Evidence	Rating	Owner (Dept/Lead)
	<p>Feedback results demonstrate that in 2023, about a third of patients said that support with cultural and religious needs was not applicable to them (new question). 1 patient said their religious and cultural needs were 'never' respected.</p> <p>Patient stories</p> <p>Patient stories are captured regularly by Locala's Engagement Team on behalf of Intermediate Care and shared with Kirklees Social Care colleagues. These stories are added to the Locala website and often displayed on site. Patient stories tell us that patients feel respected and supported whilst receiving Intermediate Care. Patient Rashida specifically told us how her religious needs had been supported.</p> <p>Regular visits by Engagement Team to Intermediate Care bed bases</p> <p>Surveys and patient stories are completed. Patients asked for real time feedback on their religious and cultural needs.</p>		

Domain 1	Commissioned or provided services overall rating	Achieving	Score 8
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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.		
Evidence	Rating	Owner (Dept/Lead)
<p>Locala offers a range of wellbeing resources through FIVE our wellbeing programme (structured around 5 steps to mental wellbeing: be mindful, connect with others, give to others, be active and keep learning). Our wellbeing offer was extended in 2023 to include financial wellbeing support. All colleagues have access to our wellbeing programme through our intranet and it is introduced to new starters at induction.</p> <p>Our Employee Assistance Programme (EAP) provided by Health Assured, is available to all colleagues 24 hours a day, 7 days a week – providing independent support, advice and a counselling service.</p> <p>All colleagues have access to external Occupational Health Services. This includes support for health conditions and rapid access to physiotherapy (both via self-referral and manager referral)</p> <p>Locala has a team of accredited Mental Health First Aiders who offer support to colleagues through the Mental Health First Aid Line.</p> <p>Our Disability Equality Network and our Invisible Illness Group provides a safe space for colleagues to share experiences, concerns, issues and coping mechanisms. Our group was shortlisted for The Nursing Times Award for Inclusion in 2023.</p>	Developing (1)	Head of Organisational Development

Locala has a range of supportive policies including mental health and wellbeing, menopause, special leave, attendance management, and flexible working. In 2023, we enhanced our special leave policy to enhance paid bereavement leave.

Our flexible working policy supports colleagues who have health conditions.

We have an active Menopause peer to peer network and we achieved Menopause Friendly Accreditation in December 2023. During our February 2024 wellbeing roadshow we will host our menopause network with input from Locala's women's health physiotherapist and run a practical exercise session around maintaining good musculo-skeletal (MSK) health.

In 2023 we introduced Health Passports, designed for colleagues with a disability, long term health condition, mental health issue or learning disability/difficulty. Health passports allow colleagues to easily record important details about their conditions, challenges they may face and any reasonable adjustments they require.

We also introduced Working Carers Passports, as many of our colleagues have responsibilities as carers. Carers passports make sure that our colleagues who are carers have the support they need to meet those challenges.

We provide flu and covid vaccinations for all colleagues.

Locala colleagues can access Schwarz Rounds, as a method of providing a safe structured forum to cover emotional and social aspects of working in healthcare. Recent Schwarz Rounds include Living and working in the shadow of loss (in line with National Grief Awareness Week); When your best does not feel good enough; My Invisible Illness – My Hidden Disability; and Caring at home and at work – a juggling act.

From January 24 we are piloting "Go See Workshops" where Human Resources (HR) and Organisational Development (OD) take a proactive approach within teams to support the management of mental and

physical health as part of an absence programme. This includes promoting getting fit and ensuring exercise is in place in line with World Health Organisation Guidelines. The workshops include an evaluation form, raising awareness of where colleagues may have requirements for reasonable adjustments.

Examples of wellbeing campaigns promoted through 2023 include:

- Bitesize awareness sessions for managers and colleagues including: stress, stress risk assessment, managing health, MSK disorders, resilience and other mental-health related workshops.
- Disability History Month bitesize sessions
- Support for Working Carers
- It's time to talk/freedom to speak up sessions
- Campaign to promote diabetes (type 1) awareness
- Campaign to promote ESCAPE-pain - a group rehabilitation programme for people with chronic joint pain that integrates educational self-management and coping strategies with an exercise regime individualised for each participant.
- Promoting Locala's Antenatal Fayres to colleagues who are parents to be.
- National Organ Donation Week, National Fitness Day, National Epilepsy Week, Men's Health Week and Tackling Loneliness

We also offer:

- gym discounts as part of our colleague benefits offer (local and national)
- access to the Headspace App - a user-friendly mindfulness, and meditation app
- A Cycle to Work scheme is available as a salary sacrifice scheme, and we promote free cycling lessons.

Locala promotes the West Yorkshire Health and Care Partnerships Mental Health and Wellbeing Hub to colleagues. The hub contains a range of resources for individuals, leaders and teams to browse, as well as a range of services, from intensive, individual treatment to resources that can support people to help themselves cope with feelings of bereavement, burnout, stress and trauma.

<p>Locala has subscribed to the 'Check-in' campaign, which aims to reduce staff suicide and promote a wellbeing culture by normalising the conversation around suicide and mental health. This includes encouraging colleagues to complete the suicide prevention 'Save a Life' eLearning.</p>		
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2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source

Evidence	Rating	Owner (Dept/Lead)
<p>Locala has a wide range of HR Policies designed to ensure our colleagues are free from abuse, harassment, bullying and physical violence from any source, including:</p> <ul style="list-style-type: none"> ○ Freedom to Speak Up ○ Equality, Diversity and Inclusion ○ Dignity at Work <p>Conflict resolution forms part of our preventative training which helps enable colleagues to identify and deal with conflict and prevent escalation. Domestic violence training forms part of our mandatory training programme for all colleagues. Our Health and Safety Manager has delivered Toolbox Talks on sexual harassment in the workplace to support teams.</p> <p>To reduce risk, all colleagues working alone in the community receive a lone worker device that includes a panic alarm that can be discreetly activated, and which automatically opens a line of communication to a national Alarm Receiving Centre, giving an emergency police response if required.</p> <p>We actively promote our Freedom to Speak Up Guardian (FTSU) who ensures that our Board, our Chief Executive and senior managers are regularly updated of any concerns being raised by colleagues.</p> <p>We have active meeting networks for race, living with long term conditions and hidden disabilities and LGBTQIA+. Colleagues are also encouraged to raise issues with their line manager, union representative, members' council colleague representatives and Human Resources (HR).</p>	<p>Developing (1)</p>	<p>Head of HR / Head of Health & Safety</p>

Our FTSU Guardian is supported by twelve FTSU Associates from different teams and protected characteristics groups.

A programme of FTSU engagement events have been carried out across the year, promoting speaking up and providing opportunities for all colleagues to raise concerns to the team and to facilitate sensitive discussions around behaviours and attitudes. In October, we ran a 'It's Time to Talk' campaign, offering 14 virtual drop-in sessions for colleagues to come together with our FTSU Guardian.

We encourage all colleagues to report incidents on Datix (our incident reporting tool), this includes reporting multiple incidents occurring as separate incidents, rather than aggregate into a single Datix. All incidents are investigated, and details recorded. Any agreed controls are noted on the patient's clinical records. This allows colleagues to be warned of the potential for adverse behaviour from the patient, carer or family member.

Our HR Advisory Service receives copies of all incidents of violence and aggression so HR can reach out and offer immediate support.

Fortnightly Just Culture meetings are held including our Freedom to Speak Up Guardian, Head of HR and HR Manager, Head of Quality, Professional Nurse Advocate Lead, Health and Safety Manager, Complaints Manager and Head of Safeguarding to encourage the sharing of stories that improve understanding of the impact of speaking up on all of those involved and help us learn from incidents.

Locala is introducing a Violence and Aggression Panel – the Terms of reference have been produced. Colleagues will be invited to come along and share their stories with the panel, who will take learning, raise awareness, and identify themes.

To support our work on our culture and behaviours in 2023 over 700 colleagues attended a Values into Action workshop, and 157 managers joined a Leading with Values masterclass about living our values and expected behaviours.

2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source		
Evidence	Rating	Owner (Dept/Lead)
<p>Our colleagues have access to a broad range of independent support and advice including:</p> <ul style="list-style-type: none"> • Our Employee Assistance Programme (provided by Health Assured) is available to all colleagues 24 hours a day, 7 days a week - support, advice and a counselling service. • Accredited Mental Health First Aiders • Trade Union representatives • Professional Nurses Advocates • Freedom to Speak Up Guardian • Colleague representatives on Locala's Members' Council • Inclusivity network leads <p>Our Network leads, Members' Council and Trade Union representatives all have protected/supported time to undertake their activities.</p> <p>Our Chief Executive and Board encourage colleagues to raise issues directly through service visits and shadowing.</p> <p>Our HR Advisory Team offer independent stay and exit interviews. Themes from exit interviews are now reported through into the Integrated Performance Report, which is presented at Workforce Committee and Board.</p> <p>Exit questionnaires are available to all leavers, this captures information around protected characteristics, and the data is used by our HR Advisory Team to spot patterns and trends.</p>	Achieving (2)	Head of HR and Head of Organisational Development

Colleagues are given access to the national speak up support scheme. The scheme provides a range of support for past and present NHS workers who have experienced a significant adverse impact on both their professional and personal lives following a formal speak up process. It offers a structured online support programme including a Health and wellbeing session, psychological support, career coaching and personal development workshops.		
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2D: Staff recommend the organisation as a place to work and receive treatment		
Evidence	Rating	Owner (Dept/Lead)
<p>67.6% would recommend Locala as a place to work (Locala full colleague survey 2022) (NHS National Staff Survey findings 2022: 57.4%)</p> <p>78.6% said if a friend or relative needed treatment I would be happy with the standard of care provided by Locala (Locala full colleague survey 2022) (NHS National Staff Survey findings 2022: 62.9%)</p> <p>Our monthly pulse survey allows us to track these key questions on a monthly basis, by business unit and service level.</p> <p>Exit questionnaires and interviews are in place for all leavers, with the learning reviewed and reported through to Workforce Committee to help us make improvements.</p> <p>We have also as introduced stay conversations to support the retention of colleagues.</p> <p>Colleague experience analysis from our full colleague survey is undertaken by protected characteristic grouping to help inform improvement plans and monitor progress.</p>	Developing (1)	Head of Organisational Development
Domain 2: Workforce health and well-being overall rating		Developing

Domain 3: Inclusive leadership

Outcome	Evidence	Rating	Owner (Dept/Lead)
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<p>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</p>	<ul style="list-style-type: none"> • Leadership for EDI sits within our Strategy and Partnerships directorate. • Our EDI Manager supports our commitment to long term change, with this role specifically created in 2022 to ensure resource and capacity to drive progress and success. They enable and empower colleagues and will be actively involved in community events across Kirklees, focusing on addressing and improving health inequalities. • Locala’s Inclusivity Networks support colleagues from ethnic minorities/global majority, identifying as LGBTQIA+, and with disabilities/invisible illness. They inform policy/decision making as well as contributing to specific matters (e.g. recruitment processes). • Our EDI Manager and Network members hosted a workshop in June 2023 to set EDI ambitions for our new Locala strategy (2024-27) and 3-year EDI Action Plan • An EDI Action Plan will be launched to further support better outcomes and diversity across the organisations delivering equitable results. • Executive Director Sponsors support each Inclusivity Network, working closely with the Chairs and offering support to progress opportunities and positively influence and represent issues at a senior level. • Our Christian Network launched in December 23, and a Carers Network is being considered after feedback at our Support for Working Carers sessions run in conjunction with Carers Count. • The EDI Working Group is a centralised governing body bringing all networks together to generate ideas/discuss plans/monitor EDI strategy progress/have intersectionality-related conversations around action/engagement. • EDI Oversight Group receives reports from the working group on progress against the strategy/responds to escalations and reports into Board/EMG. It is chaired by the Director of Strategy and Partnerships. 		
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	<ul style="list-style-type: none"> • Dedicated Network Seats at EMG/Board are provided to members to ensure leadership/governance maintains focus on EDI. • We established a reverse mentoring programme (2022 partnership with Nottingham University): 12 senior colleagues mentored by ethnic minority colleagues to better understand lived experiences and inform future decisions/behaviour; this is to be extended to all inclusivity networks in 2023/24. • Board members and senior leaders actively communicate with staff and/or system partners about health inequalities, equality, diversity and inclusion. Our clinical van has been in use to focus on reducing health inequalities across our communities. The Sexual Health Team and Immunisation team have held clinics/drop in sessions across the Kirklees and Bradford. • Locala's first family community event was held in November 2023. Over 20 stalls involving both Locala services and partner organisations joined the event with activities including health checks, immunisations – covid and flu vaccinations, diabetes checks, information on recruitment, volunteering, children's speech and language therapy, and intermediate care. Members of Locala's Executive Management Team also attended. • Locala implemented Learning Disabilities and Autism Awareness e-learning into our mandatory training programme in April 2023. We are also a pilot site for the West Yorkshire ICB Oliver McGowan Tier 1 Learning Disabilities and Autism Awareness Training. • Directors present at Colleague Induction sessions which includes equalities information to ensure new colleagues understand Locala's values and EDI commitments. • Our EDI Manager presents EDI commitments at every Colleague Induction 		
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	<ul style="list-style-type: none"> • Our Senior Leaders have attended and participated in a number of EDI events and initiatives including: <ol style="list-style-type: none"> 1. International Nurses Day 2023 (12 May 2023) and internal event for all colleagues to drop in/attend, with a focus on Equality, Diversity, and Inclusivity in Healthcare – led by Network Leads and supported by senior leaders 2. Pride Month June 2023 - Social Media campaign and internal communications, introduction message from our Chief Executive, with Locala colleagues attended Pride Events within our communities. 3. Locala Windrush (June 2023) Locala Live Special Edition including videos from our Chief Executive and our Director of Quality & Professional Practice (Pariffinalia 75 Event) 4. National Inclusion Week 2023 (25 – 27 Sep) (3 sessions) Led by our Executive Director Sponsors - this year's theme was 'Take Action Make Impact' and was designed to get colleagues thinking about what actions they can take and what impacts these actions could and should have on marginalised people in the workplace. These sessions also gathered feedback on actions and priorities aligned within our EDI action plan. 5. Relaunch of Locala's Disability Network (October 2023) (Director of Quality and Professional Practice attended and presented 6. Promotion of HIV Testing Week. Director of Quality and Professional Practice was supported by receiving HIV test. 7. During Disability History Month (Nov 23) a series of drop in sessions were held supported by Director of Strategy & Partnerships. 		
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	<p>8. Health & Wellbeing Events – events organised with input from Inclusivity Networks to promote the work of Locala with a focus on health inequalities. Similar events are being planned for 2024/5.</p> <ul style="list-style-type: none"> • Three colleagues have secured places on the award-winning West Yorkshire Fellowship Leadership Development Programme, aimed specifically at colleagues from ethnic minority backgrounds working within the Health and Care system. The programme requires executive sponsorship and mentorship. • Our commitment to diversity is recognised externally: <ol style="list-style-type: none"> 1. Selected as case study for future Fellowship Cohorts due to the level of support/best practice model provided to colleagues applying. 2. Shortlisted for Chief Allied Health Professions Officer (CAHPO) Award 2023 under AHP Leadership for EDI for our cultural/religious inclusion work in our Kirklees Intermediate Care service. 		
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<p>3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed</p>	<ul style="list-style-type: none"> • Equality, diversity and inclusion (ED&I) is a regular feature at our Workforce Committee and Board. ED&I remains a core element of our analysis of workforce data and informs our relevant strategies. • The three-year EDI Action Plan will be aligned to Locala’s new Thrive strategy (2024-2027) which has equality and health inequalities at its core. • An E&D Report is shared quarterly at our Patient Experience Group which includes our work with patients, carers and families and colleagues. • Our regular workforce metrics report provides a detailed breakdown of workforce by protected characteristics. We have also reviewed our workforce demographics against our local communities through the Census data. • All papers into Board/Committee consider the implications on diversity and inclusion. • We run regular campaigns to promote the completion by EDI (protected characteristic) data by colleagues on ESR. • Equality and health inequalities are embedded at Board and Workforce Committee meetings • Full colleague survey findings are analysed by protected characteristic groups, with findings reported in through Workforce 		
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	<p>Committee and into our EDI monthly meeting to shape our action plans.</p> <ul style="list-style-type: none">• Workforce Committee review deep dives into issues including attendance management, turnover – including learning from exit interviews.• Accessible Information Standard Bitesize workshops run on a monthly basis for all colleagues. Compliance is monitored by the Engagement Team and shared at the Patient Experience Group and Quality Committee.• Our quarterly Business Plan updates are reported into Workforce Committee and Executive Management Team, and includes an update on our work to develop an inclusive workforce that is representative of our communities.• Patient feedback is reviewed for E&D themes and responses to E&D information is compared to local census data.		
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<p>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</p>	<ul style="list-style-type: none"> • We undertake and publish all our statutory reporting requirements, including the Workforce Race Equality Standard, the Workforce Disability Equality Standard, Gender Pay Gap. Whilst not a mandated requirement, Locala has also introduced the Ethnicity Pay Gap report in 2023. All our reports are scrutinised by Workforce Committee (a sub-committee of the Board) before being signed off by Board. • Equality Impact Assessments (EIA) are completed for all projects and policies, and are reviewed by our EIA panel which includes membership from our inclusivity networks. EIAs are signed off at Executive Management level. • Locala has achieved the Investors in People Silver Award. • Inclusivity Audit undertaken in 2023 through Inclusive Employers. Feedback has shaped the development of our EDI action plan. • The EDI Action Plan will be aligned to Locala’s new Thrive strategy (2024-2027) which has equality and health inequalities at its core. 		
<p>Domain 3: Inclusive leadership overall rating</p>			
<p>Third-party involvement in Domain 3 rating and review</p>			
<p>Trade Union Rep(s): Justine Laird-Boldy</p>	<p>Independent Evaluator(s)/Peer Reviewer(s): Sophia Rafiq, EDI Project Manager, Mid Yorkshire Hospitals Trust Carys Bentley, Calderdale and Huddersfield Foundation Trust</p>		

EDS Action Plan	
EDS Lead	Year(s) active
Sarah True, Head of Engagement & Involvement	2023/24
EDS Sponsor	Authorisation date
Mary Wishart, Director of Partnership & Strategy	28/2/24

EDS Organisation Rating (overall rating): Developing
Organisation name(s): Locala Health & Wellbeing
<p>Those who score under 8, adding all outcome scores in all domains, are rated Undeveloped</p> <p>Those who score between 8 and 21, adding all outcome scores in all domains, are rated Developing</p> <p>Those who score between 22 and 32, adding all outcome scores in all domains, are rated Achieving</p> <p>Those who score 33, adding all outcome scores in all domains, are rated Excelling</p>

Domain 1			
Outcome	Objective	Action	Completion date
1A: Patients (service users) have required levels of access to the service	<p>Service 1: Ensure information for LD patients is fit for purpose</p> <p>Service 3: Additional groups needed on equality and diversity section of survey.</p>	<p>Review the Learning Disability resources in partnership with Clover Leaf.</p> <p>Engagement Team have added free text option for participants to identify as something other than 'Male/Female' on survey. Question regarding sexual orientation also added.</p>	Feb 24
1B: Individual patients (service users) health needs are met	<p>Service 1: Support available for dad's</p> <p>Service 2: Additional Training needs identified</p>	<p>Team will have a specific dad's worker to support with Emotional Wellbeing visits.</p> <p>Additional Training around Children's Mental Health including Self Harm.</p>	
1C: When patients (service users) use the service, they are free from harm			

<p>1D: Patients (service users) report positive experiences of the service</p>	<p>Service 1: Better understand the experiences of people from protected characteristics</p>	<p>Understand patient experience data by comparing it to the demographics of the caseload.</p>	
	<p>Service 2: Sharing information about local support groups</p>	<p>Engagement Team to compile a list for team to share with parents/carers.</p>	<p>Feb 24</p>

Domain 2			
Outcome	Objective	Action	Completion date
2A: When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions	Continued development of our wellbeing support offer	<ul style="list-style-type: none"> Extend Benefits and Wellbeing Roadshows across all health centres – promoting access to health checks and practical exercise sessions Promote the ‘find out how you are’ scheme Promote seasonal or targeted health condition campaigns in partnership with Occupational Health Continue to run “Go See” workshops – including support for colleagues with long term conditions Refresh our wellbeing offer as part of Caring for our Colleagues and raise awareness to colleagues Continue to promote and embed health passports to support all colleagues with a disability, long term health condition, mental health issue or learning disability/difficulty. Continue to promote and embed Working Carers Passports. 	March 2025
2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source	Embed a just learning culture.	<ul style="list-style-type: none"> Implement our approach to respectful resolutions across 2024. Develop a pro-active anti-discrimination strategy Introduce a Keeping Colleagues Safe campaign in partnership with Staff Side, including colleague stories filmed and shared to promote the importance of lone worker devices 	March 2025
2C: Staff have access to independent support and advice when suffering from	Increase access to independent support and advice.	<ul style="list-style-type: none"> Increase numbers of FTSU Associates across the organisation, ensuring reach into all areas geographically and increased support into the inclusivity network groups. Increase numbers of Professional Nurse Advocates. 	December 2024

<p>stress, abuse, bullying harassment and physical violence from any source</p>		<ul style="list-style-type: none"> • Embed Locala's Violence and Aggression Panel • Adopt the National FTSU Policy. 	
<p>2D: Staff recommend the organisation as a place to work and receive treatment</p>	<p>Continue to promote Locala as a place to work.</p>	<ul style="list-style-type: none"> • Continue to enhance Locala's flexible working offer. • Review the opportunity to introduce how we collate and compare the experiences of colleagues from protected characteristic groupings. 	<p>March 2025</p>

Domain 3			
Outcome	Objective	Action	Completion date
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	To continue to raise the profile EDI and health inequalities to enhance inclusion and understanding.	<p>Explore plans for a working carers network based on feedback from colleagues.</p> <p>Launch the 3-year EDI Action Plan</p> <p>Invite colleagues and patients to join meetings to share their experiences with an EDI focus.</p> <p>Promote a seat at Board meetings for Inclusivity Networks</p> <p>Continue to organise and attend community events with a focus on EDI.</p>	March 25
3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed	Continue to embed EDI and Health Inequalities across Locala.	<p>EDI as an agenda item on governed meetings and committees.</p> <p>Consider the launch of an Inclusion Panel to review, scrutinise and explore policies, procedures ensuring diversity and inclusion is considered and applied within service and delivery.</p>	March 25
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	Put in place additional opportunities for scrutiny of progress of EDI Plan.	<p>Promote a seat at Board meetings for Inclusivity Networks.</p> <p>Consider the launch of an Inclusion Panel to review, scrutinise and explore policies, procedures ensuring diversity and inclusion is considered and applied within service and delivery.</p>	March 25

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