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# NHS Equality Delivery System 2022 EDS Reporting Template

Version 1, 15 August 2022

# Contents

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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-andinformation-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 Community Partnerships CIC	Organisation Board Sponsor/Lead			
		James Dunmore, Executive Director of			
Name of Integrated Care System	West Yorkshire ICB	Strategy	Strategy, Involvement and Growth		

EDS Leads	Preeya Patel and Do Inequalities and Incl		At what level has th	nis been completed?
				*List organisations
EDS engagement date(s)	2 December 2024, 3 10 December 2024,	•	Individual organisation	
			Partnership* (two or more organisations)	Mid Yorkshire Hospitals NHS Trust Calderdale & Huddersfield Foundation Trust, West Yorkshire ICB – Kirklees, Wakefield, Calderdale Place
			Integrated Care System-wide*	

Date completed	23 January 2025	Month and year published	February 2025
Date authorised		Revision date	

#### **EDS Rating and Score Card**

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

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

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

## Domain 1: Commissioned or provided services

Service 1: Ea	ervice 1: Early Cancer Diagnosis: The Whitehouse Centre			
Outcome	Evidence	Rating	Owner (Dept/Lead)	
1A: Patients (service users) have required levels of access to the service	<ul> <li>Well Woman Clinics, multilingual resources, flexible appointments leading to improved access by addressing cultural and language barriers, offering gender-sensitive services, and enabling attendance through flexible scheduling.</li> <li>Cancer Champions, targeted communications, behavioural science insights utilised to provide tailored support ensures effective communication, encourage screening participation, and address unique health needs of diverse populations.</li> <li>Culturally sensitive clinics and trained staff create a safe, respectful environment for underserved populations, ensuring their comfort and reducing barriers.</li> <li>Community engagement feedback and increased screening uptake - positive feedback highlights satisfaction with tailored services and significant improvement in cancer screening rates.</li> <li>Translation of materials funded by Cancer Alliance has ensured patients from non-English speaking backgrounds could understand and access screening services.</li> <li>Collaboration with Pennine Breast Screening for flexible locations has improved service accessibility by offering more convenient screening options, addressing logistical barriers.</li> </ul>	Achieving (2)	Practice Manager and Service Manager	

Service 1: Ear	ervice 1: Early Cancer Diagnosis: The Whitehouse Centre					
Outcome	Evidence	Rating	Owner (Dept/Lead)			
1B: Individual patients (service users) health needs are met	<ul> <li>Well Woman Clinics with female clinicians demonstrates culturally sensitive care that respects religious and cultural preferences, encouraging women to access cancer screenings.</li> <li>Multilingual resources and invitations address linguistic barriers, ensuring underserved communities can understand and access information about screenings.</li> <li>Cancer Champions are trained to promote cancer awareness, showing commitment to community engagement and supporting individuals in accessing necessary health services.</li> <li>Collaboration with Pennine Breast Screening for flexible appointments highlights accessibility efforts, making screenings more convenient for patients by removing logistical barriers.</li> <li>Translation funding secured from Cancer Alliance demonstrates proactive steps to ensure inclusivity by providing key resources in multiple languages.</li> <li>Increased screening uptake among ethnic minorities and underserved groups reflects the success of targeted initiatives in reducing disparities in early cancer diagnosis rates.</li> <li>Gender-sensitive services, such as female clinicians and clinic environments reinforces inclusivity and the consideration of patients' religious and cultural beliefs.</li> <li>Ongoing monitoring and monthly patient participation group engagement shows a commitment to sustainability and continuous improvement, with patient feedback shaping service delivery.</li> <li>Consideration of socioeconomic barriers through local services and flexible options indicates efforts to address financial and logistical challenges that may prevent access to cancer screenings.</li> </ul>	Achieving (2)	Practice Manager and Service Manager Clinical Lead			

Outcome	Evidence	Rating	Owner (Dept/Lead)
1C:When patients (service users) use the service, they are free from harm	<ul> <li>Gender-sensitive Well Woman Clinics with female clinicians demonstrates a safe and comfortable environment for women, reducing the risk of cultural or gender-based discomfort or harm.</li> <li>Multilingual resources and interpreter services ensures patients fully understand the procedures, reducing the risk of harm due to miscommunication or lack of informed consent.</li> <li>Behavioural science-informed communication strategies help patients make informed decisions about their health, minimising the risk of harm through misunderstanding or misinformation.</li> <li>Flexible appointments and localised services reduces barriers such as travel and time constraints, preventing harm caused by missed or delayed screenings.</li> <li>Training of Cancer Champions empowers community leaders to educate and support others, ensuring accurate information and reducing risks of harmful myths or stigma.</li> <li>Collaboration with Pennine Breast Screening to improve service accessibility - provides high-quality and timely screenings, reducing the risk of late diagnoses or missed opportunities for early intervention.</li> <li>Continuous monitoring and engagement with patient participation groups ensures ongoing evaluation and responsiveness to patient feedback, mitigating risks and maintaining a high standard of care.</li> </ul>	Achieving (2)	Practice Manager and Service Manager

Service 1: Ear	ly Cancer Diagnosis: The Whitehouse Centre		
Outcome	Evidence	Rating	Owner (Dept/Lead)
1D: Patients (service users) report positive experiences of the service	<ul> <li>Positive feedback from patients attending Well Woman Clinics indicates that patients feel comfortable and supported, fostering trust and satisfaction with the service.</li> <li>Increased screening uptake among ethnic minority groups and underserved populations reflects that patients appreciate and engage with the accessible and inclusive approach of the service.</li> <li>Multilingual resources ensuring effective communication demonstrates that patients value being informed in their preferred language, improving their overall experience.</li> <li>Engagement through monthly patient participation groups shows that patients feel heard and involved in shaping the service, leading to positive perceptions and outcomes.</li> <li>Collaboration with Pennine Breast Screening for flexible and localised services highlights patient appreciation for convenient appointments, making the service more user-friendly and positively received.</li> </ul>	Achieving (2)	Practice Manager and Service Manager

Service 2: Suicide Preve	Service 2: Suicide Prevention: Interim Entry Pathway (IEP)					
Outcome	Evidence	Rating	Owner (Dept/Lead)			
1A: Patients (service users) have required levels of access to the service	<ul> <li>Responsive service through IEP, interlinking multiple pathways demonstrates improved access by ensuring patients receive the right service at the right time.</li> <li>Immediate connection with crisis teams for suicide risk factors ensures timely support for high-risk patients, reducing delays in care.</li> <li>Case study: hearing impairment addressed via SMS and home visit with a trusted translator. Highlights accessibility for diverse communication needs, ensuring inclusivity for those with disabilities.</li> <li>Child Development Practitioners addressing behavioural needs prevents inappropriate referrals and frees up time in other services.</li> <li>Timely responses in high-risk situations ensures urgent needs are met effectively and efficiently.</li> <li>Evaluation and feedback mechanisms supports continuous improvement in access to services.</li> </ul>	Developing (1)	Operational Service Manager – Starting Well Division			

Outcome	Evidence	Rating	Owner (Dept/Lead)
1B: Individual patients (service users) health needs are met	<ul> <li>Multi-pathway response supporting reduction in waiting times enables timely care and addresses behavioural needs effectively.</li> <li>Use of Fraser competence to tailor care to young people's maturity and consent capabilities. This reflects individualised care based on patient-specific needs and legal considerations.</li> <li>Holistic approach addressing protected characteristics ensures personalised assessments and culturally sensitive care, particularly for high-risk groups like LGBTQIA+.</li> <li>Accessibility needs identified at referral. This enhances individualised care by accommodating specific needs.</li> <li>Culturally sensitive assessments including ethnicity, religion, and belief are used; this promotes care that respects diverse backgrounds and preferences.</li> <li>Increased engagement with families and young people improves understanding of health needs through direct feedback.</li> </ul>	Developing(1)	Operational Service Manager – Starting Well Division
1C: When patients (service users) use the service, they are free from harm	<ul> <li>Immediate connection to crisis teams for high-risk situations reduces risks associated with delayed interventions.</li> <li>Inclusion of accessibility standards and communication needs in referrals Promotes safe, barrier-free service delivery, preventing harm caused by miscommunication or unmet needs.</li> </ul>	Developing	Operational Service Manager – Starting Well Division

Outcome	Evidence	Rating	Owner (Dept/Lead)
	<ul> <li>Evaluation processes for continuous improvement identifies risks and implements changes to mitigate them over time.</li> <li>Culturally sensitive care considering protected characteristics minimises risk of harm through respectful and tailored approaches.</li> <li>Use of SMS and trusted individuals in communication prevents communication-related risks, ensuring safe and inclusive interactions.</li> <li>Crisis response tailored to individual needs to ensure appropriate and timely action, reducing potential harm.</li> </ul>		
D: Patients (service users) report positive experiences of the service	<ul> <li>Case study demonstrates effective engagement through inclusive communication (e.g., hearing impairment). Demonstrates satisfaction through tailored care, fostering trust and positive feedback.</li> <li>Feedback loops with young people and families ensure patient voices are heard, leading to continuous improvements and higher satisfaction.</li> <li>Culturally sensitive and inclusive care encourages positive experiences by meeting diverse patient needs.</li> <li>Timely responses to high-risk situations enhances patient confidence and satisfaction in the service.</li> </ul>		Operational Service Manager – Starting Well Division

Service 2: Suicide Prevention: Interim Entry Pathway (IEP)			
Outcome	Evidence	Rating	Owner (Dept/Lead)
	<ul> <li>Direct communication with patients and families using preferred methods improves patient experience by ensuring clarity and understanding.</li> <li>Holistic care that considers protected characteristics leads to positive outcomes by addressing patients' full range of needs.</li> </ul>		

Service 3: Supporting Children and Families at End of Life			
Outcome	Evidence	Rating	Owner (Dept/Lead)
1A: Patients (service users) have required levels of access to the service	<ul> <li>Streamlined referral process Improved accessibility through partnerships and ACP building.</li> <li>Communication preference assessment ensures clear, simple language avoiding medical jargon, utilising easy read documents.</li> <li>Disability support in referrals addresses needs on individual's basis.</li> <li>Cultural sensitivity to meet the needs of the child and family e.g. ethnicity recorded to support tailored care, and interpreter services used (including British Sign Language), suiting needs of child and family.</li> </ul>	Achieving (2)	Children's Community Nursing Manager
1B: Individual patients (service users) health needs are met	<ul> <li>Fraser competence assessment ensures care is age-appropriate and consensual.</li> <li>Personalised care approach integrates religion and belief in assessments.</li> <li>Inclusive future improvements plan for engaging young people and families for the best and most appropriate outcome for the family.</li> <li>Consideration of disability (physical/ learning disabilities) required. Many of our children with life limiting diagnosis have profound physical disabilities and/or learning disabilities. Some</li> </ul>	Achieving (2)	Children's Community Nursing Manager

Service 3: Supporting Children and Families at End of Life			
Outcome	Evidence	Rating	Owner (Dept/Lead)
	parents also have a disability. Flag on the electronic record to indicate a learning disability. Physical disability would be highlighted on assessment.  • Implementation of Accessible Information Standards.		
1C: When patients (service users) use the service, they are free from harm	<ul> <li>Adherence to accessibility standards: Access is discussed and managed ensuring site access is agreed prior to appointments. Home visits are available if access is not suitable.</li> <li>End of Life care focused on individualised support.</li> <li>Choices during and after death are to be explored and decided from child and family – no one family is the same this must be protected.</li> </ul>	Achieving (2)	Children's Community Nursing Manager
1D: Patients (service users) report positive experiences of the service	<ul> <li>Improved patient experience including Flexible choices and support from beginning to end.</li> <li>Future feedback mechanisms demonstrated through continual training, case study exploring, and collaborative partnerships build strong care for children and families.</li> <li>Multi Agency working provides the patient and family the opportunity to provide details once whilst accessing multiple services through data sharing.</li> </ul>	Excelling (3)	Children's Community Nursing Manager

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)
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 includes financial wellbeing support. All colleagues have access to our wellbeing programme through our intranet, and wellbeing and benefits platform (available via mobile phones) and it is introduced to new starters at induction.	Achieving (2)	Head of Organisational Development
Our Employee Assistance Programme (EAP) provided by Health Assured, is available to all colleagues 24 hours a day, 7 days a week – providing confidential, independent support and advice. Through our EAP colleagues have access to:		
<ul> <li>up to 6 sessions of face-to-face counselling</li> <li>unlimited access to a confidential telephone helpline</li> <li>legal information services including debt &amp; financial information</li> <li>24/7 critical incident telephone support</li> <li>family advice line on topics such as childcare and eldercare</li> <li>manager consultancy and support</li> </ul>		
All colleagues have access to external Occupational Health Services. This includes support for health conditions and rapid access to physiotherapy (both via self-referral (via HR) and manager referral)		

Locala has a team of accredited Mental Health First Aiders who offer support to colleagues through the Mental Health First Aid Line.

Our Disability Equality Network and our Invisible Illness Group provides a safe space for colleagues to share experiences, concerns, issues and coping mechanisms.

Locala has a range of supportive policies including mental health and wellbeing, menopause, special leave, attendance management, career breaks, and flexible working. Our special leave policy has been enhanced to include paid bereavement leave. Our Attendance Policy now includes an informal wellbeing meeting – which includes the offer of support for colleagues with a new diagnosis or long-term condition.

Our flexible working policy supports colleagues who have health conditions. In April 24, we introduced Bank Holiday Flex, giving colleagues the opportunity to work on one or more bank holidays rather than using annual leave to take time off. This gives colleagues increased flexibility in taking leave.

We have a Menopause peer to peer network, and we achieved Menopause Friendly Accreditation in December 2023. In the last 12 months we have run sessions on:

- Brain fog and how menopause can affect women mentally
- Raising awareness of common gynaecological cancers, how to manage risks, screening tests and more
- Benefits of massage and essential oils
- Endometriosis lunch and learn webinar

and launched a Women's Health Page on our intranet which includes information on workplace adjustments, exercises and guidance to self-manage your own health.

All colleagues have access to 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 use 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 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. Schwarz Rounds across 2024 include Getting on a bit, Menopause affects us all, The power of work relationships, I'm still standing, Why do I continue to come to work, and When something small made a big difference. Locala has 3 trained Schwarz Round facilitators.

In January 24 we introduced "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. This year, we have run 4 Go See Workshops across a range of clinical teams, and we will continue to offer these across 2025.

Examples of wellbeing campaigns promoted through 2024 include:

- Bitesize awareness sessions for managers and colleagues including Everyday adjustments and general wellness as we approach the winter months; Working Carers Passports and Health Passports.
- Disability History Month Reclaiming Narratives
- Support for Working Carers, including Carers Wellness Sessions
- Listen Up Locala /freedom to speak up sessions
- Safeguarding Week focus on domestic abuse
- National Work life Week focusing on wellbeing at work and work life balance
- World Sepsis Day
- NHS Digital Weight Management Programme.

We have run 3 Wellbeing roadshows across 2024. In our September 2024 roadshow, we offered Get Set Goal through The University of Huddersfield. Colleagues were offered free Health Checks including blood pressure, heart rate, respiratory rate and oxygen saturation levels. We will continue to offer health checks across 2025 through our wellbeing roadshows.

Our wellbeing roadshows also included:

- Wellbeing walks, led by a trained physiotherapist, to support colleagues with the intention towards fostering health, wellbeing and happiness.
- run a practical exercise session women's health physiotherapist around maintaining good musculoskeletal (MSK) health.
- Breath work seminars where participants learn the Joy of Breathing technique, practice deep breathwork and energy meditation, and experience a profound relaxation

#### 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 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.

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.

Locala are part of The West Yorkshire Trauma Informed Network, and we are working towards The Trauma Informed and Responsive Charter. We are working to make sure all our policies are trauma informed, with our Trauma Informed Lead having oversight into all our policies.

In May 2024, Locala introduced our leadership development programme - Managers Essentials – to all our Locala leaders. The programme includes development around compassionate leadership, respectful resolutions, attendance management, dignity at work and change management.

Evidence	Rating	Owner (Dept/Lead
Locala has a wide range of policies designed to ensure our colleagues are free from abuse, harassment, bullying and physical violence from any source, including:  o Freedom to Speak Up (we have adopted the national policy) o Equality, Diversity and Inclusion o Dignity at Work o Violence, Aggression and Abusive Behaviour Policy  Conflict resolution forms part of our preventative training which helps enable colleagues to identify and deal with	Developing (1)	Head of HF / Head of Health & Safety
conflict resolution forms part of our preventative training which helps enable colleagues to identify and dear 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, and this now forms part of the offer to colleagues through our Violence and Aggression Panel.		
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.		
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. In 2024, we have introduced mandatory Speak Up training for all colleagues, Listen Up as part of our leadership development programme for all leaders, and Follow Up for our senior leaders including Executive Directors and Non-Executive Directors.		

In November 2024 our FTSU guardian in partnership with our Non-Executive Director with the FTSU portfolio, led a half day development session with our Board and senior leaders.

Our FTSU Guardian is supported by fifteen, FTSU Associates from different teams and protected characteristics groups. This includes 7 newly trained FTSU Associate in 2024.

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 24, our FTSU Guardian ran 'Listen Up Locala" month', offering at least 2 sessions per week over the month, across a mix of days/times. A Network member, FTSU associate, or PNA was also in support.

Our FTSU Guardian and Colleague Board Member have run 6 onsite visits over the year, across a range of Locala sites.

We have run 2 combined PNA and FTSU associates development sessions, providing education around psychological safety.

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).

Locala has signed up to the NHS England Sexual Safety Charter and has been actively raising awareness and understanding around sexual misconduct/harassment with colleagues and line managers. This includes the introduction of Understanding of Sexual Misconduct in the Workplace eLearning and Dignity at Work training for line managers through our Managers Essential leadership development programme.

This will be further supported by a sexual safety intranet page and a poster campaign across our colleague areas of clinical settings to advise of Locala's stance on tackling sexual harassment and that it will not be tolerated.

We encourage all colleagues to report incidents on Datix (our incident reporting tool), for any form of violence, aggression or abuse to colleagues both internally and externally. 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. Red alerts are now visible on SystemOne.

Our HR Advisory Service receives copies of all incidents of violence and aggression so HR can reach out and offer immediate support. Signposting to external specialist support is available to anyone who has experienced sexual assault.

Regular 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 has a monthly Violence and Aggression Panel –where colleagues can join to share their stories, explore their own experiences and learning, and get support from the panel. Panel membership includes health and safety, HR, operational colleagues and team management. Learning from the panel is then shared across the organisation.

Our Violence and Aggression Panel Virtual Roadshows runs on a quarterly basis. Our first roadshow was designed to launch and raise awareness of the Violence and Aggression Panel. Our next roadshow will share learning from the previous quarter – with the aim to support colleagues to trust your judgement.

## 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)
Our colleagues have access to a broad range of independent support and advice including:  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.  Occupational Health  Accredited Mental Health First Aiders  Trade Union representatives  Professional Nurses Advocates  Freedom to Speak Up Guardian  Freedom to Speak Up Guardian Associates  Colleague representatives on Locala's Members' Council  Inclusivity network leads  Our Network leads, Members' Council and Trade Union representatives all have protected/supported time to undertake their activities.  Our Chief Executive and Board encourage colleagues to raise issues directly through service visits and shadowing.  Our HR Advisory Team offer independent stay and exit interviews. Themes from exit interviews are reported through into the Integrated Performance Report, which is presented at our People and Culture Committee and Board.	Achieving (2)	Head of HR and Head of Organisational Development

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.

Across 2024, we have continued to grow our numbers of Freedom to Speak up Associates and Professional Nurse Advocates to support our colleagues. We have recently invited our Allied Health Professionals to apply for the Professional Advocate course, to continue to grow this essential support role.

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.

We offer legal support for individuals and the business to manage legal processes around potentially violent patients.

Where individual patient(s) are known to be potentially threatening we will bring in additional security to protect colleagues, the patient, and one patients else who is at the premises and may be affected.

Work is under way to prepare for the introduction of Martyn's Law – Terrorism Prevention of Premises reviewing implications around management of terrorist events and violent intruders.

2D: Staff recommend the organisation as a place to work and receive treatment			
Evidence	Rating	Owner (Dept/Lead)	
62% would recommend Locala as a place to work (Locala quarterly pulse survey Autumn 2024) (NHS National Staff Survey findings 2023: 61.2%)  78% said if a friend or relative needed treatment I would be happy with the standard of care provided by Locala (Locala quarterly pulse survey Autumn 2024) (NHS National Staff Survey findings 2023: 64.97%)  Our quarterly pulse survey allows us to track these key questions, alongside questions clustered under the themes of culture, leadership, inclusive & engaged, and better care everyday.  We analyse our data at divisional and service level, and also through an inclusivity lens – giving us feedback from colleagues with lived experience in protected characteristic groups to helps us inform improvement plans and monitor progress against the ambition within our Thrive Strategy (2024 – 2027) to be the most inclusive and engaged health organisation.  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.  We have also as introduced stay conversations to support the retention of colleagues.		Head of Organisational Development	
Domain 2: Workforce health and well-being overall rating	Developing		

#### Domain 3: Inclusive leadership

Outcome	Evidence	Rating	Owner
			(Dept/Lead)

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

• Leadership for EDI sits within our Chief Executive Officer

- Achieving (2)
- Locala's investment of two Health Inequalities and Inclusion Leads in September 2024 complementing Thrive Business Strategy Pillars: Better Care Every day, Empowering Colleagues and Serving more Communities simultaneously supporting inclusive actions and priorities for colleagues internally and disrupting health inequalities within services and communities we serve.
- Locala's Inclusivity Networks continue to support colleagues from ethnic minorities/global majority, identifying as LGBTQIA+, and with disabilities/invisible illness. They support policy/decision making as well as contributing to Inclusion and Inequalities strategic actions.
- Our Christian Network launched in December 23, now sees a Faith Network Group formed by March 2025
- Locala's EDI Action Plan delivered over 50% of actions set with over 42 ambitious actions, including inclusive recruitment processes, training and investment for colleagues and delivering inequality projects within the communities we serve.
- 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.
- Locala Carers Network is being launched after feedback at our Support for Working Carers sessions run in conjunction with Carers Count.

- Governance redesign dictates a scheduled forwarding agenda of EDI present within all Board Meetings.
- Internal Governance offers the opportunity for Inclusion and Inequalities have flexible reporting lines into committees, senior leadership meetings and executive management team.
- The re-launch of Locala's Inclusion Steering Group offers a stronger Governance structure, positioned within Specialist meetings reporting lines offer further flex complementing reporting upwards and downwards.
- Locala will undertake a detailed review EDI journey and will inform our priorities and ambitions for 2025/2026
- Dedicated Network Seats at EMG/Board are provided to members to ensure leadership/governance maintains focus on EDI.
- Our clinical van funded through Locala's social value investment supports reducing health inequalities across our communities. Locala's immunisations team have engaged and immunised children across our most deprived locations. Tissue Viability Nurses are utilising the van to engage with the homeless community and collaborating with Change, Grow, Live where we aim to support adults in treatment for substance misuse ensuring wound care is offered where appropriate
- Locala implemented Learning Disabilities and Autism Awareness elearning into our mandatory training programme in April 2023. In 2024 we moved over to the Oliver McGowan Learning Disabilities

and Autism Awareness Training this is now embedded and delivered through ESR to all Locala colleagues.

- Locala's Learning Disabilities and Autism Steering Group will provide internal assurance on compliance with regulatory and good practice requirements associated with addressing health inequalities, and accessibility if Locala services for people with learning disabilities, people who are autistic or both. This includes NICE (National Institute of Clinical Excellence) guidance and the learning disability improvement standards. This also supports delivery of Locala's THRIVE Strategy; under the parameter of expanding our reach to serve more communities, a key priority is to reduce health inequalities through targeted action for priority groups, bringing together existing data and activity.
- Kirklees Ethnically Diverse Community Network has invited the Leads to be members of the Steering Group aimed to drive and support this network, a white paper group designed to tackle systemic injustices and changed network attendees to address internal and external challenges.
- Locala has invested in a dedicated Trauma Informed Lead that will support the organisation gain accredited status through West Yorkshire Trauma Informed Network and working towards the Trauma infirmed and responsive charter, led by ICB.

- Directors present at Colleague Induction sessions which includes equalities information to ensure new colleagues understand Locala's values and EDI commitments.
- Our Senior Leaders have attended and participated in a number of EDI events and initiatives including:
- Cervical Screening Session delivered by Locala's Gynae Doctor for both internal and external community members raising awareness of cervical screening and cervical cancer eradication
- Business Strategy Engagement Sessions led by Executive Directors for all colleagues to be part of it.
- Thrive Champions team channel and meetings for all colleagues to share updates, ideas and this is reported through the Board within the Thrive Planning document
- Locala's Race Equality Network delivered a Black history month event in October 2024, our Deputy CEO chaired with guest speakers from colleagues and external partners.
- International Nurses Day 2024 8<sup>th</sup> May an all-day event where colleagues could drop in and out of throughout the day with the focus of "The Economic Power of Care" theme.

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 Chief Executive mentors our local Voluntary Organisations within our local communities.

- Internal mentoring with senior leaders mentoring a range of colleagues and leaders continues to be available and offered to all
- Our commitment to diversity is recognised externally:
- Selected as case study for future Fellowship Cohorts due to the level of support/best practice model provided to colleagues applying.
- 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.
- Kirklees Ethnically Diverse Community Network Steering Group Member
- KEDCN Health Inequality Subgroup Committee Member
- West Yorkshire Neurodiverse Community of Practice Network
- Kirklees Health Inequalities Working Group
- Kirklees corporate social responsibility Network

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

- Equality, Diversity and Inclusion is an agenda feature at our People and Culture Committee and Board. Remains a core element and features on the forwarding schedule. Redesign of Governance structure offers Health Inequalities and Inclusion a forward topic at the following: People and Culture Committee, Serving More Communities Assurance Group, EMT, JLG and Board.
- A senior leadership Inclusion Action Plan will be launched by March 2025 ensuring individuals and team development within inclusion and inequalities with dedicated action plans tailored to Directors and their portfolios.
- Standardised Divisional Reports escalated to Committees and board highlight opportunities, risks and successes.
- Inclusion Priorities will complement Locala's annual EDI Action Plan aligning themes and ambitions to Thrive, and there will be workstreams aligned to each theme – for example one theme is Training and People Investment, with various workstreams, for instance Locala Academy, Investors in People, Managers Essential Training, and bitesize masterclasses.
- Staff risk assessments, DSE's, health passports, long term conditions and absence management occurrences are recorded. These are monitored and reviewed within our HR function. Work is then aligned to common themes allowing us to proactively address emerging themes.
- Our clinical van through Locala's social value investment supports reducing health inequalities across our communities. Locala's board reports document these and here are a few examples of recent

Developing (1)

inequality actions: immunisations team have engaged and immunised children across our most deprived locations. Tissue Viability Nurses are utilising the van to engage with the homeless community and collaborating with Change, Grow, Live where we aim to support adults in treatment for substance misuse ensuring wound care is offered where appropriate.

- 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. This is also reported through NHS systems such as WRES/WDES, Accessible Information Standards, staff exit interviews, Impact assessment, Gender Pay Gap, and Ethnicity Pay Gap.
- Locala's reports and papers submitted to board utilise data to inform priorities and action plans
- Full colleague survey findings are analysed by protected characteristic groups, with findings reported in through People and Culture Committee and into our EDI monthly meeting to shape our action plans.
- People and Culture Committee seek assurance through reviewing deep dives reports for example attendance management, inclusive recruitment processes turnover, including learning from exit interviews.

- · Accessible Information Standard Bitesize workshops run on a quarterly basis for all colleagues. Compliance is monitored by the Engagement Team and shared at the Patient Experience Group and Quality Committee.
- Business Plan is reported quarterly pertaining to inclusive work force practices, actions updated and achievement of goals and ambitions, with exploration currently taking place to KPI commitments and produce a Locala Inclusion Dashboard offering stronger benchmarking.
- Patient feedback is reviewed for E&D themes and responses to E&D information is compared to local census data.
- Monthly EDI Network Leads monthly catch-up meetings with CEO
- Monthly REN catch up meetings relating to her executive sponsor for the Race Equality Network.

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

- 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 People and Culture 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 QIA and 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 in 2021 and within the Thrive business strategy working towards Investors in People Gold.
- Inclusive Priorities will align to Thrive Business Strategy with workstreams and ongoing task and finish groups adhering to Governance.
- Health Inequalities and Inclusion Leads alongside Performance has developed a new Health Inequalities dataset that is aligned to services allowing demographical data to be used for health inequalities purposes.
- Inclusion steering Group will offer an additional level of assurance to Senior Leaders and Board with flexible reporting lines.

Developing (1)

## Domain 3: Inclusive leadership overall rating: 4 Developing

## Third-party involvement in Domain 3 rating and review

## **Trade Union Rep(s):**

Justine Laird-Boldy OD Practitioner Trade Union Representative Nicola Bewell Team Leader Staff Side Representative

## Independent Evaluator(s)/Peer Reviewer(s):

Brian Chiyesu EDI Director Mid-Yorkshire Hospital Trust Preeya Patel Health Inequalities Lead and Members Council Member Carolyn Dixon Head of OD Kathryn Ewart Freedom to Speak Up Guardian Katie Pickles Head of Quality Disability Network Co-Chair

EDS Organisation Rating (overall rating): 18 Developing

Organisation name(s): Locala Health & Wellbeing

Those who score under 8, adding all outcome scores in all domains, are rated Undeveloped

Those who score between 8 and 21, adding all outcome scores in all domains, are rated Developing

Those who score between 22 and 32, adding all outcome scores in all domains, are rated Achieving

Those who score 33, adding all outcome scores in all domains, are rated Excelling

EDS Action Plan		
EDS Lead	Year(s) active	
Donna Oldman Preeya Patel	2024 - 2025	
EDS Sponsor	Authorisation date	
Karen Jackson CEO and EDI SRO		

	Domain 1					
Outcome		Objective	Action	Completion date		
1A: Patients (service users) have required levels of access to the service		Service 1: To continue to monitor uptake for trends and ensure uptake continues; service will respond as needed.	GP practice manager to monitor uptake of the services for trends, and flag actions as required.	Feb 2026		
		Service 2: To refine the referral process and enhance communication to better meet individual needs.	Conduct a review of the current referral process in collaboration with service users, carers, and multiagency partners to identify gaps and barriers. Implement improvements as needed.	Feb 2026		

1B: Individual patients (service users) health needs are met	Service 1: To ensure continued understanding of individual cultural needs and focus on cancer prevention.	Utilise culturally tailored community engagement to raise awareness about cancer prevention and the importance of early diagnosis.	Feb 2026
	Service 1: To offer ongoing promotion of cancer screening – it is ever evolving.	Utilise communication and outreach that includes regular updates through multilingual channels, community events, and partnerships with local organisations to disseminate information on cancer screening programmes, eligibility criteria, and benefits.	Feb 2026
	Service 2: To expand inclusion to reflect all protected characteristics, especially sexual orientation and gender identity.	Ensure materials and support services are inclusive, using gender-neutral language, diverse imagery, and tailored resources that address the specific needs of individuals based on sexual orientation and gender identity.	Feb 2026
	Service 3: Continuous training strengthening team's expertise.	The team will access training focused on palliative care, including cultural competency, communication skills, and advanced care planning to strengthen their expertise and improve the quality of care for children and families.	Feb 2026

1C: When patients (service users) use the service, they are free from harm		Regularly review patient feedback mechanisms, such as surveys and focus groups, specifically designed to capture insights from diverse populations.	Feb 2026
	Service 2: Plans will include better engagement with young people, families, and exploring the inclusion of questions about sexual orientation on referral forms to address associated risks.	Pilot the inclusion of questions about sexual orientation in referral forms, ensuring they are framed sensitively and accompanied by staff training on addressing associated risks and providing appropriate support.	Feb 2026
	<b>Service 3:</b> Collaborative and partnership approach strengthens support for families.	Foster partnerships with local hospices, community organisations, and spiritual leaders to create a multi-disciplinary support network.	Feb 2026

1D: Patients (service users) report positive experiences of the service	Service 1: Monthly engagement from patient participation groups to promote screening and respond to feedback is ongoing.	Incorporate feedback into service improvements and provide updates on actions taken to build trust and demonstrate impact.	Feb 2026
	Service 2: To increase engagement with young people and families to ensure continuous feedback and improvement.	Establish feedback loops by implementing regular surveys and engagement for young people and families. Use the insights gathered to co-produce service enhancements and ensure ongoing improvements align with their needs and preferences.	Feb 2026
	Service 3: Listening and responding to each family, adjusting to suit need	Continue to implement a personalised care approach, ensuring care is flexible and can be adjusted promptly based on family feedback.	Feb 2026

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> <li>Continue to develop and roll out our Manager Essentials leadership development programme to all Locala leaders</li> <li>Continue to run "Go See" workshops – including support for colleagues with long term conditions</li> <li>Deliver a quarterly programme of Benefits and Wellbeing Roadshows across 2025/6, extending our offer across our geographical areas.</li> <li>Evaluate our wellbeing offer to ensure it is impactful and meets the needs of our colleagues, promoting a culture of wellbeing and self-care.</li> <li>Continue to offer Get Set Goal health checks across 2025 (through our wellbeing roadshows)</li> <li>Promotion of the NHS Digital Weight Management Programme.</li> <li>Work towards The Trauma Informed and Responsive Charter</li> <li>Ensure all policies are trauma informed – for new policies upon writing, for existing policies upon renewal.</li> <li>Reset the menopause peer to peer network</li> <li>Develop and launch a men's health intranet page</li> <li>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.</li> <li>Continue to promote and embed Working Carers Passports.</li> </ul>	March 2026	

2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source	Embed a just learning culture.	<ul> <li>Continue to implement our approach to respectful resolutions across 2025/6</li> <li>We will continue to grow the number of FTSU associates, targeting colleagues living with a disability or long-term condition.</li> <li>Develop and launch a sexual safety intranet page and poster campaign</li> <li>Work towards The Trauma Informed and Responsive Charter</li> </ul>	March 2026
2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source	Increase access to independent support and advice.	<ul> <li>Increase numbers of FTSU Associates across the organisation, ensuring reach into all areas geographically and increased support into the inclusivity network groups.</li> <li>Increase numbers of Professional Nurse Advocates and Professional Advocates.</li> <li>Continue to promote Locala's Violence and Aggression Panel and share learning widely.</li> <li>Renew the Standard Operating Procedure for Safety During Intruder Situations.</li> </ul>	March 2026
2D: Staff recommend the organisation as a place to work and receive treatment	Continue to promote Locala as a place to work.	<ul> <li>Continue to run our quarterly pulse survey and analyse findings through an inclusivity lens.</li> <li>Work with our inclusivity networks to further develop our pulse survey to encourage colleagues to share their lived experiences of working at Locala, reducing the number of colleagues selecting prefer not to say when asked about protected characteristic groupings.</li> </ul>	March 2026

Domain 3	Domain 3				
Outcome	Objective	Action	Completion date		
3A: Board members, system leaders (Band 9 and VSM) and those with line management responsibilities routinely	To continue to raise the profile EDI and health inequalities to enhance inclusion and understanding.	Inclusive Priorities List Inclusion Steering Group relaunch	Mar 2025 Feb 2025		
demonstrate their understanding of, and commitment to, equality and		Our Christian Network launched in December 23, now sees a Faith Network Group formed by March 2025	Mar 2025		
health inequalities		Gain accreted status through West Yorkshire Trauma Informed Network and working towards the Trauma infirmed and responsive charter, led by ICB.	April 2026		
3B: Board/Committee papers (including minutes) identify equality and health inequalities	Continue to embed EDI and Health Inequalities across Locala.	A senior leadership Inclusion Action Plan will be launch Locala will undertake a detailed review EDI journey and will inform our priorities and ambitions for 2025/2026	Mar 25		
related impacts and risks and how they will be mitigated and managed		HR aligned activity aligned to common themes allowing us to proactively address emerging themes and be data driven, annually reviewed. Business Plan reported quarterly pertaining to inclusive work force practices, actions updated and achievement of goals.	April 2026		
		Locala has achieved the Investors in People Silver Award and within the Thrive business strategy working towards Investors in People Gold.	Apr 2026		

3C: Board members and system leaders (Band 9 and VSM) ensure levers are in place	Put in place additional opportunities for scrutiny of progress of EDI Plan.	Production of a Locala Inclusion Dashboard offering stronger benchmarking.	Apr 2026
to manage performance and monitor progress with staff and		Introduction of the Health Inequalities Dataset embedding into operational EIA's.	Apr 2026
patients		EIA review	Apr 2026
		Senior Leadership Action Plan including succession planning and attraction actions for all with focus for global majority individuals and colleagues.	Apr 2026

	Activity Log 2023 -2024			
Date	Objective	Action	Completed Y/N	
2023-2024 Domain 1a:	Service 1: Ensure information for LD patients is fit for purpose	Review the Learning Disability resources in partnership with Clover Leaf.	Y	
	Service 3: Additional groups needed on equality and diversity section of survey.	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.	Y	
2023-2024 Domain 1b:	Service 1: Support available for dad's  Service 2: Additional Training	Team will have a specific dad's worker to support with Emotional Wellbeing visits.  Additional Training around Children's Mental Health including Self		
2023-2024 Domain 1c:	needs identified	Harm.		
2023-2024 Domain 1d:	Service 1: Better understand the experiences of people from protected characteristics  Service 2: Sharing information about local support groups	Understand patient experience data by comparing it to the demographics of the caseload.  Engagement Team to compile a list for team to share with parents/carers.		

2023-2024	Continued development of our wellbeing support	Extend Benefits and Wellbeing Roadshows across all health centres – promoting access to health checks and practical exercise sessions	Yes
Domain 2A:	offer	<ul> <li>Promote the 'find out how you are' scheme</li> </ul>	No
	51161	Promote seasonal or targeted health condition campaigns	Yes
		<ul> <li>Continue to run "Go See" workshops – including support for colleagues with long term conditions</li> </ul>	Yes
		<ul> <li>Refresh our wellbeing offer as part of Caring for our Colleagues and raise awareness to colleagues</li> </ul>	Yes
		<ul> <li>Continue to promote and embed health passports to support all colleagues with a disability, long term health condition, mental health</li> </ul>	Yes
		<ul><li>issue or learning disability/difficulty.</li><li>Continue to promote and embed Working Carers Passports.</li></ul>	Yes
2023-2024	Embed a just learning	Implement our approach to respectful resolutions across 2024.	Yes
Domain 2B:	culture.	<ul> <li>Develop a pro-active anti-discrimination strategy</li> <li>Introduce a Keeping Colleagues Safe campaign in partnership with Staff Side, including sharing colleague stories to promote the importance of lone worker devices &amp; introduce red flags on SystmOne</li> </ul>	No Yes
2023-2024	Increase access to	Increase numbers of FTSU Associates across the organisation, ensuring	Yes
Domain 2C:	independent support and advice.	reach into all areas geographically and increased support into the inclusivity network groups.	
		Increase numbers of Professional Nurse Advocates.	Yes
		Embed Locala's Violence and Aggression Panel	Yes
		Adopt the National FTSU Policy.	Yes
2023-2024	Continue to promote	Continue to promote Locala as a place to work.	Yes
Damain CD	Locala as a place to	Continue to enhance Locala's flexible working offer.	Yes
Domain 2D:	work.	<ul> <li>Review the opportunity to introduce how we collate and compare the experiences of colleagues from protected characteristic groupings.</li> </ul>	Yes

2023-2024 Domain 3a:	Continue to promote Locala as a place to work.	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.	Y
		experiences of coneagues from protected characteristic groupings.	Υ
			Υ
			Y
			Υ
2023-2024	Continue to embed EDI and	EDI as an agenda item on governed meetings and committees.	Υ
Domain 3b:	Health Inequalities across Locala.	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.	N Inclusion Group
2023-2024	Put in place additional	Promote a seat at Board meetings for Inclusivity Networks.	Υ
Domain 3c:	opportunities for scrutiny of progress of EDI Plan.	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.	N Inclusion Group

Patient Equality Team NHS England and NHS Improvement england.eandhi@nhs.net		