

NHS Equality Delivery System (EDS) Report 2023/2024

1. PURPOSE

The purpose of this report is to:

- Summarise the process taken to deliver Equality Delivery System (EDS22)
- Report the ratings for the 3 Domains including actions identified

2. BACKGROUND

The Equality Delivery System (EDS) is an NHS improvement tool to help organisations review and develop their approach to addressing health inequalities. It is designed to help organisations assess and improve services, provide working environments free of discrimination, while meeting the requirements of the Equality Act 2010. It a requirement for NHS commissioners and providers.

EDS22 is made up of three Domains with a total of eleven outcomes, against which organisations measure their successes and challenges with protected characteristic and vulnerable community groups using evidence and insight.

The outcomes, grouped into 3 Domains, are as follows:

Domain 1: Commissioned or Provider Services	
1A	Patients (service users) have required levels of access to the service.
1B	Individual patients (service user's) health needs are met
1C	1C: When patients (service users) use the service, they are free from harm
1D	Patients (service users) report positive experiences of the service
Domain 2: Workforce Health and Well-being	
2A	When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD, and mental health conditions
2B	When at work, staff are free from abuse, harassment, bullying and physical violence from any source
2C	Staff have access to independent support and advice when suffering from stress, abuse, bullying, harassment, and physical violence from any source.
2D	Staff recommend the organisation as a place to work and receive treatment
Domain 3: Inclusive Leadership	
3A	Board members, system leaders and those with line management responsibilities routinely demonstrate their understanding of, and commitment to, equality and health inequalities.
3B	Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed.
3C	Board members, system, and senior leaders ensure levers are in place to manage performance and monitor progress with staff and patients

2.0 RATINGS/SCORING

The EDS22 Ratings Guidance provides a template for each organisation to rate/score its performance and evidence against the outcomes within each Domain. Subject to our overall score per domain, our activity will fall into one of four categories; (1) Undeveloped; (2) Developing; (3) Achieving and (4) Excelling.

3.0 OUTCOMES

3.1 Domain 1

A key principle for Domain 1 is that the assessment of the provider's performance should involve local community groups, service users and patient representatives.

Assessment Events

The ICB and provider organisations, Mid Yorkshire Hospitals Trust, Calderdale & Huddersfield Foundation Trust, West Yorkshire ICB – Kirklees, Wakefield and Calderdale Place hosted 3 Assessment Events across Calderdale, Kirklees and Wakefield.

- 2nd December 2024, [Early Cancer Diagnosis](#) - White Rose House, Wakefield
- 3rd December 2024, [Suicide Prevention](#) - Elsie Whiteley Innovation Centre, Halifax
- 10th December 2024, [End of Life](#) – Dewsbury Health Centre, Dewsbury

Process of engagement

- **Invitations** – invitations were sent to community groups, patients and organisations across the three areas targeting groups with a particular interest in the key subjects.
- **Pre-event Information** – a week before each event attendees were sent a Presentation Summary and an Evidence Summary for each of the providers presentations.
- **Pre-event Briefing** - a briefing to all attendees with purpose, agenda and information on the scoring process.
- **Scoring** - using the EDS scoring criteria, participants scored each presentation using the evidence supplied, presentation content and answers to questions put forward at the event.

Results

Service 1: Early Cancer Diagnosis - The Whitehouse Centre		
Overview	Score	Actions
1a) Patients (service users) have required levels of access to the service.	Achieving	GP practice manager to monitor uptake of the services for trends, and flag actions as required.
1b) Individual patients (service user's) health needs are met	Achieving	Utilise culturally tailored community engagement to raise awareness about cancer prevention and the importance of early diagnosis. 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.
<i>1c) When patients (service users) use the service, they are free from harm</i>	Achieving	Regularly review patient feedback mechanisms, such as surveys and focus groups, specifically designed to capture insights from diverse populations.
<i>1d) Patients (service users) report positive experiences of the service</i>	Achieving	Incorporate feedback into service improvements and provide updates on actions taken to build trust and demonstrate impact.
Service 2: Suicide Prevention - 0-19 Interim Entry Pathway (IEP)		
Overview	Score	Actions
<i>1a) Patients (service users) have required levels of access to the service.</i>	Developing	Conduct a review of the current referral process in collaboration with service users, carers, and multi-agency partners to identify gaps and barriers. Implement improvements as needed.
<i>1b) Individual patients (service user's) health needs are met</i>	Developing	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.
<i>1c) When patients (service users) use the service, they are free from harm</i>	Developing	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.
<i>1d) Patients (service users) report positive experiences of the service</i>	Developing	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.
Service 3: End of Life - Supporting Children and Families at End of Life in Children's Nursing		
Overview	Score	Actions
<i>1a) Patients (service users) have required levels of access to the service.</i>	Achieving	
<i>1b) Individual patients (service user's) health needs are met</i>	Achieving	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.
<i>1c) When patients (service users) use the service, they are free from harm</i>	Achieving	Foster partnerships with local hospices, community organisations, and spiritual leaders to create a multi-disciplinary support network.

<i>1d) Patients (service users) report positive experiences of the service</i>	Excelling	Continue to implement a personalised care approach, ensuring care is flexible and can be adjusted promptly based on family feedback.
Overall score Domain 1: 8 - Achieving		

3.2 Domain 2: Workforce health and wellbeing

A Presentation took place on Thursday 23rd January 2025 to score Domain 2. As per the EDS22 guidelines the following representatives were invited: Freedom to Speak up Guardian, Trade Unions, Network colleagues, Colleague Members of Members Council. Representatives from Mid Yorkshire Hospital Trust were invited to Peer Review the presentation.

Overview	Score	Actions
<i>2a) When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD, and mental health conditions.</i>	Achieving	<ul style="list-style-type: none"> Continue to develop and roll out our Manager Essentials leadership development programme to all Locala leaders Continue to run “Go See” workshops – including support for colleagues with long term conditions Deliver a quarterly programme of Benefits and Wellbeing Roadshows across 2025/6, extending our offer across our geographical areas. Evaluate our wellbeing offer to ensure it is impactful and meets the needs of our colleagues, promoting a culture of wellbeing and self-care. Continue to offer Get Set Goal health checks across 2025 (through our wellbeing roadshows) Promotion of the NHS Digital Weight Management Programme. Work towards The Trauma Informed and Responsive Charter Ensure all policies are trauma informed – for new policies upon writing, for existing policies upon renewal. Reset the menopause peer to peer network Develop and launch a men’s health intranet page 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.
<i>2b) When at work, staff are free from abuse, harassment, bullying and physical violence from any source</i>	Developing	<ul style="list-style-type: none"> Continue to implement our approach to respectful resolutions across 2025/6 We will continue to grow the number of FTSU associates, targeting colleagues living with a disability or long-term condition.

		<ul style="list-style-type: none"> Develop and launch a sexual safety intranet page and poster campaign Work towards The Trauma Informed and Responsive Charter
2c) Staff have access to independent support and advice when suffering from stress, abuse, bullying, harassment, and physical violence from any source.	Achieving	<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 and Professional Advocates. Continue to promote Locala's Violence and Aggression Panel and share learning widely. Renew the Standard Operating Procedure for Safety During Intruder Situations.
2d) Staff recommend the organisation as a place to work and receive treatment	Developing	<ul style="list-style-type: none"> Continue to run our quarterly pulse survey and analyse findings through an inclusivity lens. 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.
Overall score Domain 2: 6 Developing		

3.3 Domain 3: Inclusive leadership

A Presentation took place on Thursday 23rd January 2025 to score Domain 3. As per the EDS22 guidelines the following representatives were invited: Freedom to Speak up Guardian, Trade Unions, Network colleagues, Colleague Members of Members Council. Representatives from Mid Yorkshire Hospital Trust were invited to Peer Review the presentation.

Overview	Score	Actions
3a) Board members, system leaders and those with line management responsibilities routinely demonstrate their understanding of, and commitment to, equality and health inequalities.	Achieving	<ul style="list-style-type: none"> Inclusive Priorities List Inclusion Steering Group relaunch Our Christian Network launched in December 23, now sees a Faith Network Group formed by March 2025 Gain accreted status through West Yorkshire Trauma Informed Network and working towards the Trauma informed and responsive charter, led by ICB.
3b) Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed.	Developing	<ul style="list-style-type: none"> 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

		<ul style="list-style-type: none"> 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. Locala has achieved the Investors in People Silver Award and within the Thrive business strategy working towards Investors in People Gold.
3c) Board members, system, and senior leaders ensure levers are in place to manage performance and monitor progress with staff and patients	Developing	<ul style="list-style-type: none"> Production of a Locala Inclusion Dashboard offering stronger benchmarking. Introduction of the Health Inequalities Dataset embedding into operational EIA's. EIA review Senior Leadership Action Plan including succession planning and attraction actions for all with focus for global majority individuals and colleagues.
Overall score Domain 3: 4 Developing		

4.0 OVERALL SCORE

We received an overall score of **18** which puts us in the '**Developing**' category.

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