



## NHS Equality Delivery System 2022 Report for Bradford Teaching Hospitals NHS Foundation Trust 2023-24

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## NHS Equality Delivery System (EDS)

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Name of Organisation	Bradford Teaching Hospitals NHS Foundation Trust
Name of Integrated Care System	West Yorkshire Integrated Care Board
Organisation Board Sponsor or Lead	Mel Pickup, Chief Executive
EDS Lead	Kez Hayat, Head of Equality, Diversity & Inclusion
EDS engagement date(s)	Domain 1: Thursday 1 <sup>st</sup> February 2023 Domains 2 & 3: Monday 29 <sup>th</sup> January 2023
At what level has this been completed?	
Individual organisation	Bradford Teaching Hospitals NHS Foundation Trust
Partnership* (two or more organisations)	
Integrated Care System-wide*	

Date completed	20 <sup>th</sup> February 2024	Month and year published	February 2024
Date authorised	28 <sup>th</sup> February 2024	Revision date	February 2025

## 1. Purpose

The purpose of this report is to:

- Summarise the process undertaken to deliver on the Equality Delivery System (EDS2022).
- Report on the EDS Ratings that have been achieved for each Domain, and for Bradford Teaching Hospitals NHS Foundation Trust overall.

## 2. Background

Implementation of the Equality Delivery System (EDS) is a requirement on both NHS commissioners and NHS providers. It is the foundation of equality improvement within the NHS, acting as an accountability and improvement tool for NHS organisations - in active conversations with patients, public, staff, staff networks and trade unions - to review and develop their services, workforce and leadership.

In August 2022, NHS England published a new version of EDS, EDS2022. NHS commissioners and provider services are required to undertake an evidence collection and grading exercise on an annual basis.

EDS2022 is a system that helps NHS organisations improve the services they provide for their local communities and provide better working environments, free of discrimination, for those who work in the NHS, while meeting the requirements of the Equality Act 2010, including the Public Sector Equality Duty. The EDS2022 was developed by the NHS, *for* the NHS, taking inspiration from existing work and good practice.

The EDS2022 comprises eleven outcomes spread across three Domains, which are:

#### **Domain 1: Commissioned or Provided Services**

(See section 4 for the 3 service areas which provided the focus for our review).

- 1a) People using Respiratory services can access them easily.
- **1b)** Individual patient/ services users' health needs are met.
- **1c)** Patients/ Service users are free from harm.
- 1d) Patients/ Service users report a positive experience.

#### Domain 2: Workforce Health and Wellbeing

**2a)** Staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions.

**2b)** 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 BTHFT as a place to work and receive treatment.

#### **Domain 3: Inclusive Leadership**

**3a)** Board members, system leaders (Band 9&VSM) and those with line management responsibilities routinely demonstrate their understanding of, and commitment to equality and health inequalities.

**3b)** Board/ committee papers (including minutes) identify equality and health related impacts and risks, and how they will be mitigated and managed.

**3c)** Board members and system leaders (Band 9 & VSM) ensure levers are in place to manage performance and monitor progress with staff and patients.

Each outcome measure is evaluated, scored, and rated using available evidence and insight (see section 2 for and overview of the EDS2022 Rating and Scoring).

The EDS report is designed to give an overview of the organisations most recent EDS implementation and must be published on the Trust website no later than 28<sup>th</sup> February each year.

The EDS 2022 suite of documents and supporting resources can be found in the equality hub section of the NHS England website.

## 3. EDS2022 Rating and Scoring

In accordance with <u>the EDS rating & scoring guidance</u>; each organisation should engage with key stakeholders to develop their unique scores for each domain and for the organisation as a whole.

For each domain a diverse range of stakeholders are asked to score each outcome measure based on the evidence provided, and in the context of their own lived experience. Scores may range between 0 and 3 depending on how well each

stakeholder perceives the organisations progress under each outcome measure (see table 1 below).

Outcome Measure Scores: Scores for each outcome measure are then calculated as an average of the overall scores provided by stakeholders for each outcome measure (score between 0 and 3).

**Domain Scores:** Once each outcome measure has an average score (see table 1 below), these are added together to gain the domain scores.

Organisation Rating: Domain scores are then added together to provide the overall score/ EDS2022 Organisation Rating. Ratings are in accordance with scores are below. The scoring system allows organisations to identify gaps and areas requiring action.

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#### Table 1 EDS22 Scoring

### 4. Approach

NHS organisations across the West Yorkshire Health & Care Partnership worked together to implement the new EDS2022 framework. As this is the first time that the refreshed EDS2022 framework has been delivered in West Yorkshire; EDI leads

across the partnership collaborated to agree an approach that would be effective and support delivery. The West Yorkshire EDS2022 working group held three workshops which took place during 2023 on each of the domains to understand the new approach, plan delivery and support colleagues to implement the new framework.

For Domain 1, which assesses equality performance for commissioned or provided services, the West Yorkshire EDS2022 Working Group agreed that each place within West Yorkshire would work in partnership with provider organisations at the five West Yorkshire places. The Working Group agreed to focus on three services or clinical pathways: Maternity, Children and Young People's Mental Health, and Respiratory services, providers were then asked to select their service areas.

Within the scope of this decision by the WY Health & Care Partnership; Airedale Hospitals NHS Foundation Trust (ANHSFT) focused on lung cancer services and Bradford District Care Foundation Trust (BDCFT) focused on Child & Adolescent Mental Health Services.

Along with the Bradford District & Craven ICB, Bradford Teaching Hospitals NHS Foundation Trust chose to focus on Respiratory Services which aligns with the Core 20 Plus 5 approach to reducing health inequalities and the West Yorkshire Health and Care Partnership's priorities. <u>Information about Core 20 Plus 5 can be found in</u> <u>the equality hub section of the NHS England website.</u>

Our decision, as a Trust, to focus on <u>Asthma, Sleep</u> and <u>Lung Cancer Services</u> (3 services within Respiratory) was made in discussion with clinical leads in those areas and in accordance with the <u>EDS2022 technical guidance</u>, with a view to picking one area that we know is doing well (in regard to the 4 outcome measures), 1 area that is not doing as well, and one where the performance is unknown.

#### Task & Finish Groups:

Co-ordinated by the Equality, Diversity & Inclusion team; The Trust established a series of task & finish groups bringing together key colleagues to gather and review the available evidence and insights in relation to the outcome measures for each Domain.

A number of meetings with all colleagues from the task and finish groups took place to explore and examine the requirements. Colleagues then collated and gathered the evidence in accessible, format, including a number of presentations, with the aim of sharing this evidence with a range of stakeholders.

A list of the information gathered for each Domain can be found in Appendix 2.

## 5. Stakeholder Engagement

<u>Two</u> engagement events were arranged to ensure key stakeholders had the opportunity to review and discuss the available evidence/ insights and providing opportunity to share their feedback and scores based on both the evidence and including their own lived experience.

#### Domain 1: Community Engagement Event

Service representatives, members of the voluntary and community sector and patients/ members of the public were invited to a community engagement event, which was arranged in collaboration with Bradford District Care Foundation Trust, Airedale Hospitals Foundation Trust and Bradford District & Craven Health and Social Care Partnership. Over 50 people attend the event which took place at Scorex House (in the centre of Bradford) on the 1<sup>st</sup> February 2024. This was an opportunity for the Trust to showcase the evidence/ insights through presentations and café style networking.

Participants were invited to engage in discussions where they were asked to provide their scores for each outcome measure (in accordance with <u>the EDS rating</u> <u>& scoring guidance</u> see section 3 above), along with any feedback and/or suggestions for improvement.

Over 50 people attended the community engagement event. Participants were 'well engaged and the event was well received.

The overall feedback suggests there is some good practice that takes place (in relation to Domain 1) to support the needs of diverse communities and patients. It was also noted that there is more to do in ensuring we are continuing to improve the access, experience, and outcomes for our diverse communities.

Colleagues present on the day strongly felt this was an excellent opportunity for the Trust to showcase the work which is taking place across the Trust.

A list of participating organisations for the community engagement event can be found in Appendix 1.

#### Domains 2 & 3: Staff Engagement Event

A staff engagement event was held on Monday 29<sup>th</sup> January 2024 in the Listening for Life Conference Centre, Bradford Royal Infirmary. Staff, staff network members and trade union representatives were invited to review all the evidence/ insights which were showcased in a series of presentations and café style networking.

Colleagues from the Equality, Diversity & Inclusion team, Freedom to Speak Up, Organisational Development, Human Resources, Occupational Health and Estates & Facilities, were all present on the day and delivered a range of presentations for their respective areas. Colleagues were also part of the café style networking event where they were able to answer questions and share a wide range of information in terms of the services they provide for staff across the Trust.

<u>A survey</u> was developed for Domain's 2 and 3 to allow participants the opportunity to share their feedback on the evidence showcased at the engagement event. Participants were also asked to draw on their own experiences, and to share any suggestions for improvement. Finally, they were also asked to evaluate the evidence and provide a rating for each outcome measure.

Over 40 members of staff attended the staff engagement event.

Colleagues present on the day strongly felt this was an excellent opportunity to showcase all the excellent work which is taking place across the Trust. Participants were 'well engaged and the event was well received. Colleagues also fed back that more similar type of engagement and networking events should take place in the future.

## 6. EDS2022 Outcomes for Bradford Teaching Hospitals NHS Foundation Trust

#### Outcomes for Domain 1 (Commissioned & Provided Services):

With a range of scores provided for each outcome measure (between **Undeveloped** to **Excelling**), the average score provided for each of the four outcome measures in Domain 1 are recorded below and provide the overall rating for Domain 1 at BTHFT. Further details of the evidence/ insights showcased under Domain 1 can be found in Appendix 2.

Table 2 - Domain 1 scores for Commissioned or Provided Services

(Respiratory Services, including Asthma, Sleep and Lung Cancer Services)

Domain 1 Outcomes	Average Score
1a) People using Respiratory services can access them easily	Achieving (score 2)
<b>1b)</b> Individual patient/ services users' health needs are met	Achieving (score 2)
<b>1c)</b> Patients/ Service users are free from harm	Achieving (score 2)
1d) Patients/ Service users report a positive experience	Achieving (score 2)
Total Score for Domain 1	Achieving (score 8)

BTHFT scored **Achieving** for each of the outcomes for Domain 1 with an average score of 2 for each outcome measure. This provides a Domain 1 total score of 8 and a rating of **Achieving**.

#### Outcomes for Domain 2 (Workforce Health & Wellbeing):

With a range of scores/ratings provided for each outcome measure (between **Developing** and **Excelling**); the average score provided for each of the four outcome measures in Domain 2 are recorded below and provide the overall rating for Domain 2 at BTHFT. Further detail of the evidence/insights showcased under Domain 2 can be found in Appendix 2.

#### Table 3 - Domain 2 scores for Workforce Health & Wellbeing

Domain 2 Outcomes	Average Score
<b>2a)</b> Staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions.	Achieving (score 2)
<b>2b)</b> Staff are free from abuse, harassment, bullying and physical violence from any source.	Achieving (score 2)
<b>2c)</b> Staff have access to independent support and advice when suffering from stress, abuse, bullying, harassment and physical violence from any source.	Achieving (score 2)
<b>2d)</b> Staff recommend BTHFT as a place to work and receive treatment.	Achieving (score 2)
Total Score for Domain 2	Achieving (score 8)

BTHFT scored **Achieving** for each of the outcomes for Domain 2 with an average score of 2 for each outcome measure. This provides a Domain 2 total score of 8 and a rating of **Achieving**.

#### Outcomes for Domain 3 (Inclusive Leadership):

With a range of scores/ ratings provided for each outcome measure (between **Developing** and **Excelling**); the average score provided for each of the four outcome measures in Domain 3 are recorded below and provide the overall rating for Domain 3 at BTHFT. Further detail of the evidence/insights showcased under Domain 3 can be found in Appendix 2.

#### Table 4 - Domain 3 scores for Inclusive Leadership

Outcomes	Average Score
<b>3a)</b> Board members, system leaders (Band 9&VSM) and those with line management responsibilities routinely demonstrate their understanding of, and commitment to equality and health inequalities.	Achieving (score 2)
<b>3b)</b> Board/ committee papers (including minutes) identify equality and health related impacts and risks, and how they will be mitigated and managed.	Achieving (score 2)
<b>3c)</b> Board members and system leaders (Band 9 & VSM) ensure levers are in place to manage performance and monitor progress with staff and patients.	Achieving (score 2)
Total Score for Domain 3	Achieving (score 8)

#### **Domain 3: Peer Review Process**

Representatives from Airedale Hospitals NHS Foundation Trust were also invited to the staff engagement event on 29<sup>th</sup> January 2024 to review the evidence/insights and through a peer review process, approved the ratings developed through the evidence gathering and engagement process. In addition, they felt that the Trust was close to excelling on some outcome measures, which was really encouraging.

#### Total EDS2022 rating for BTHFT

Adding together the overall scores for each of the 3 domains; <u>The Trust has</u> <u>attained an overall EDS rating of **Achieving** (see table 5 below)</u>

#### Table 5 – Overall Domain Scores and EDS2022 rating for BTHFT

Total EDS rating for BTHFT	Achieving (Overall EDS score: 24)
Domain 1: Score 8 Domain 2: Score 8 Domain 3: Score 8	

## 7. Key findings, themes, and areas for future focus

#### Domain 1:

- Ensure policy and practice is consistent across all departments in terms of meeting the diverse needs of patients.
- To increase awareness around neuro-diverse patients and their needs.
- To ensure staff are empowered and trained on meeting the needs of patients with additional needs.
- Where individual and personalised needs are met, positive feedback around this was received.
- Evidence presented on the day suggests there is good practice in place in relation to Domain 1 and strong evidence of policy and practice which supports this.

#### Domain 2:

- More managers to adopt inclusive and compassionate leadership styles.
- Occupational Health waiting times need to be reduced.
- Policy and practice to be applied consistently across the organisation (with focus on communication and training for line managers).
- Managers need to be empowered and enabled to deal effectively with Equality, Diversity & Inclusion in the workplace.
- All staff to be supported consistently (both clinical and non-clinical).
- Increase awareness of hidden disabilities.
- Staff who are abused or harassed should be supported adequately and in a timely manner.
- Reduce 'lip service' and encourage proactive approaches to staff wellbeing.
- Increase awareness of professional behaviours in the workplace.
- To ensure we have a representative workforce across the Trust.

#### Domain 3:

- More focus on psychological safety for staff in raising concerns.
- Ensure information and communications are timely and regular (ensuring <u>all</u> staff are updated).
- More information on Senior Managers at Board level and for them to be more visible.
- Consistent approaches to policy and practice.

## 8. Next Steps

The Equality, Diversity & Inclusion team will work with key stakeholders across the Trust to ensure the 'Key findings, themes and areas of focus' in section 7 above (and as captured in the action plan at Appendix 5) are aligned to existing areas of work and fed into the development of key EDI related action plans as they are reviewed over the coming 12 months.

The team will also complete a full review and planning process to ensure any learning from this years' implementation is incorporated into the EDS2022 roll out plans for the 2024/2025 review to maximise the potential benefits for next years' approach.

## Appendix 1: List of participating organisations at the Community Engagement/ Grading Event

- Bradford Teaching Hospital NHS Trust
- Bradford District Care NHS Foundation Trust
- Airedale NHS Foundation Trust
- Bradford & Craven District ICB
- CAMHS
- BAME voices Park Lane Centre
- Roshi Ghar
- Equality Together
- Making Space Bradford and Airedale Carer Support Service
- South Asian Women's Advocacy Support Group
- Trust Governors
- Members of staff equality networks in their roles as service users
- School of Applied Sciences, University of Huddersfield
- Department of Health and Wellbeing Bradford council
- Race Equality Network,
- Bradford Study Support Network (BSSN)
- Bradford Trident
- Womenzone
- CABAD
- Bakare Barley Ltd (EDI Consultancy)

# Appendix 2: Summary of Evidence and Rating Against EDS Outcomes for each Domain

Domain T. Commissioned of provided services.		
Outcome	Evidence	Rating
1A: Patients (service	• "Supporting safe care at home" research engaging with diverse patients and developing	Achieving
users) have required levels of access to the service	solutions that make care safer and more accessible for all, and with focus on those with protected characteristics and other groups at risk of health inequalities.	(score 2)
of access to the service	protected characteristics and other groups at hisk of health inequalities.	
	Data showing lung cancer diagnosis by ethnicity and age	
	"Hi Vis Walk-around" and the positive impact on vulnerable patients in the Trust	
	Data from the Friends & Family Test	
	Referral to Treatment flow chart -outlining service standards	
	Analysis of DNA's in Respiratory services by protected characteristic	
	BTHFT Equality & Diversity Council Terms of Reference (chaired by Mel Pickup.	
	Demonstrating the Trust commitment at Board level to improving the outcomes for people	
	with protected characteristics and addressing health inequalities (across the system where services are connected)	
	Staff Equality Networks: providing a voice for our diverse staff at a strategic level, raising	
	the profile of Race/ Disability/ LGBT+ equality and seeking to address issues raised	
	through network members' lived experience.	

#### Domain 1: Commissioned or provided services.

Outcome	Evidence	Rating
	<ul> <li>Equality Census: Enabling the collection, retention and analysis of personal diversity information for staff with the aim of highlighting and addressing potential inequalities.</li> <li>BTHFT Equality, Diversity &amp; Inclusion Strategy: including our strategic EDI objectives for 2023-2025. Highlighting our EDI ambitions, our activity, approach and progress</li> <li>Managers Equality, Diversity &amp; Inclusion Briefing: A half-day face-to-face course for line managers, providing direction, guidance and safe space discussion around their role and remit in relation to EDI at BTHFT, ensuring a better experience for patients and staff</li> </ul>	
1B: Individual patients (service users) health needs are met	<ul> <li>BTHFT Patient Experience &amp; Engagement Strategy: "Kindness at every step. No decision about you without you"</li> <li>"Supporting safe care at home" research engaging with diverse patients and developing solutions that make care safer and more accessible for all, and with focus on those with protected characteristics and other groups at risk of health inequalities.</li> <li>Accessible Information Standard: Outline of how the Trust is meeting the accessibility needs of our patient, including examples of different communication formats and comms and engagement around the standard.</li> <li>Carer's Passport: Ensuring the needs of carers and patients are met.</li> <li>Individualised Care: Including "This is me", VIP, Red Bags/ Individualised care bags for learning disability patients (containing familiar items that maintain safety and comfort and necessary items such as medicines)</li> <li>Sunflower Lanyards: poster and lanyards further demonstrating the Trusts approach to supporting those with additional needs.</li> </ul>	Achieving (score 2)

Outcome	Evidence	Rating
	Respiratory Ward Case Study (Video) showcasing the inclusive care provided by our teams when a patient and her partner needed it most.	
	Access Able: Supporting BTHFT to ensure our website is fully accessible.	
	<ul> <li>Spiritual, Pastoral and Religious Care Service and SPaRC app: offering accessible support and guidance to patients and staff in need, regardless of religion or belief.</li> </ul>	
	<ul> <li>Trans Equality Policy for Patients and Staff</li> <li>BTHFT Equality Impact Assessment pro form and guidance: used to ensure equality impacts are considered in the development and review of all Trust Policies, guidelines, services and site facilities.</li> </ul>	
	<ul> <li>Accessible Patient Advice/ Guidance Leaflets: e.g.Fasrena Connect 360: Asthma home care guide (available in 13 different languages</li> </ul>	
	Outline of how the Lung Cancer Service are meeting patients individual needs:	
	<ul> <li>Patient information videos and other accessible information about investigations or treatment</li> <li>Monthly patient support group</li> </ul>	
	Patient telephone line performance standards (maximising accessibility)	
	<ul> <li>Use of language line/ BSL/ Interpreting services, including translation of letters, when required.</li> </ul>	
	<ul> <li>Organising transport for patients who struggle to get to clinics</li> </ul>	
	<ul> <li>Facilitating the use of patient support workers and relatives, where required, to ensure extra support is provided when needed.</li> </ul>	

Outcome	Evidence	Rating
	• Outline of how the Sleep and Asthma Services are meeting patients individual needs:	
	<ul> <li>Use of BSL/ Interpreting services when needed (including a lap top for on-line BSL interpreting)</li> </ul>	
	<ul> <li>All facilities in outpatients are wheelchair friendly</li> <li>Telephone conversations for patients unable to attend clinic (with alternate monthly face-to-face consultation with Respiratory Nurse and physio)</li> </ul>	
	<ul> <li>Facility to do Transcutaneous Carbon Dioxide measurements (TOSCA) which are less invasive</li> </ul>	
	Sleep study tests are done in-house (with results available on EPR)	
	<ul> <li>All component services work together to provide holistic care for patients (with a weekly multi-disciplinary team meeting to ensure a joined-up approach)</li> </ul>	
1C: When patients (service users) use the service, they are free from harm	"Supporting safe care at home" research engaging with diverse patients and developing solutions that make care safer and more accessible for all, and with focus on those with protected characteristics and other groups at risk of health inequalities.	Achieving (score 2)
	<ul> <li>"Zero Tolerance to Abuse": Presentation on the Trust' violence prevention/ security management outlining how the Trust supports the safety and wellbeing of both patients and staff.</li> </ul>	
	<ul> <li>BTHFT Safeguarding Policy</li> <li>"15 Steps Walk-around" demonstrating public involvement in a range of patient safety measures.</li> </ul>	

Outcome	Evidence	Rating
	<ul> <li>Good Recruitment Practice: leaflet highlighting the need for rigorous processes when hiring new employees, specifically;</li> <li>Pre-employment screening – why pre-employment checks are so important in ensuring the health, safety and well-being of applicants and patients. Providing assurance that applicants are appropriately qualified and are who they say they are.</li> <li>Recruitment processes – Our robust recruitment process is detailed in training for managers and ensures we attract/ retain a diverse pipeline and carry out necessary checking of knowledge, experience and requirements that are free from discrimination.</li> <li>Freedom to Speak Up data and comms: a supportive and blame free mechanism for reporting and acting upon instances of poor patient care, poor handling of patient safety incidents or poor staff culture.</li> </ul>	
1D: Patients (service users) report positive experiences of the service	<ul> <li>Respiratory Ward Case Study (Video) showcasing the inclusive care provided by our teams when a patient and her partner needed it most.</li> <li>Baywater CPAP (Sleep Service) patient survey showing over 90% service satisfaction rate.</li> <li>Data from Friends &amp; Family Test and PLACE</li> <li>"Supporting safe care at home" research engaging with diverse patients and developing solutions that make care safer and more accessible for all, and with focus on those with protected characteristics and other groups at risk of health inequalities.</li> <li>BTHFT Equality, Diversity &amp; Inclusion Strategy: including our strategic EDI objectives for 2023-2025. Our approach to addressing 'Health Inequalities' and recognising the link</li> </ul>	Achieving (score 2)

<ul> <li>between staff and patient. Developed through engagement with our staff and communities.</li> <li>Workplace Civility at BTHFT: understanding the link between staff and patient treatment.</li> <li>Staff Survey Results: Over 50% of staff would recommend BTHFT as a place to work and receive treatment.</li> <li>Nursing Times Workforce Summit Award 2023 Winner of "Best Employers for Diversity &amp; Inclusion"</li> <li>Lung Cancer Services (examples of engaging with patients to improve their experience):</li> <li>Completion of an annual patient experience survey for Lung Cancer patients who have directly used our services in Bradford. Demonstrating a good response rate and positive results (see above: Baywater)</li> <li>Monthly patient support group/ patient user group (providing support, sharing information, consultation)</li> </ul>	Outcome	Evidence	Rating
<ul> <li>Staff Survey Results: Over 50% of staff would recommend BTHFT as a place to work and receive treatment.</li> <li>Nursing Times Workforce Summit Award 2023 Winner of "Best Employers for Diversity &amp; Inclusion"</li> <li>Lung Cancer Services (examples of engaging with patients to improve their experience):</li> <li>Completion of an annual patient experience survey for Lung Cancer patients who have directly used our services in Bradford. Demonstrating a good response rate and positive results (see above: Baywater)</li> <li>Monthly patient support group/ patient user group (providing support, sharing information,</li> </ul>			
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Diversity & Inclusion"         • Lung Cancer Services (examples of engaging with patients to improve their experience):         • Completion of an annual patient experience survey for Lung Cancer patients who have directly used our services in Bradford. Demonstrating a good response rate and positive results (see above: Baywater)         • Monthly patient support group/ patient user group (providing support, sharing information,			
<ul> <li>experience):</li> <li>Completion of an annual patient experience survey for Lung Cancer patients who have directly used our services in Bradford. Demonstrating a good response rate and positive results (see above: Baywater)</li> <li>Monthly patient support group/ patient user group (providing support, sharing information,</li> </ul>			
<ul> <li>directly used our services in Bradford. Demonstrating a good response rate and positive results (see above: Baywater)</li> <li>Monthly patient support group/ patient user group (providing support, sharing information,</li> </ul>			
		directly used our services in Bradford. Demonstrating a good response rate and positive	
Positive feedback shared informally via thank you cards.		Positive feedback shared informally via thank you cards.	

Overall Score for Domain 1	Achieving (score 8)

## Domain 2: Workforce Health & Wellbeing

Outcome	Evidence	Rating
2A: When at work, staff are provided with support to manage obesity, diabetes,	Presentation and data charts from the Trust "Workplace Health & Wellbeing Service" showcasing:	Achieving (score 2)
asthma, COPD and mental health conditions	<ul> <li>Number of staff: accessing the Employee Assistance Programme, being seen by Occupational Health for MH reasons/ stress/ COPD/ diabetes</li> </ul>	
	Staff Gym and exercise classes	
	Signposting to West Yorkshire Mental Health Hub	
	Monthly "Access to Work" MH practitioner support	
	<ul> <li>Occupational Therapy video's guiding staff through meditation, breathing, neck &amp; shoulder exercises on Thrive.</li> </ul>	
	• Managing Mental Well-being at Work policy	
	Health, Wellbeing & Attendance Management policy	
	•Managing sickness absence training slides (includes signposting to support	
	• Return to Work Pro forma: includes prompts to discuss further action and support.	
	Specialist Mental Health (MH) Single Session Rapid Access Services, including data analysis around the uptake.	
	<ul> <li>Outcome data for clinical and significant change (Jacobson &amp; Truax reliable change index) for those accessing Specialist trauma focussed psychological therapy (referral from</li> </ul>	

Outcome	Evidence	Rating
	a single session MH consultation, psychology led critical incident support session or OH referral	
	<ul> <li>Supporting and further developing a 'Stepped Care' approach to MH support for staff within the Trust: including service objectives, training objectives and participant feedback for:</li> </ul>	
	<ul> <li>Wellbeing champions (training/ supervision to support development of positive peer-to-peer network of support in response to staff MH needs</li> </ul>	
	Manager training on MH awareness	
	Psychoeducational & experiential wellbeing sessions	
	• Overview of the Trust Wellbeing Offers (from the Trust People Promise Manager)	
	<ul> <li>Overview of the Trust' declining sickness absence rates relating to mental health (MH)</li> </ul>	
	Data on appraisals and wellbeing conversations and accompanying training for managers.	
	Staff Survey data 2022 on "We are Safe & Healthy" highlighting 59.4% of staff believe BTHFT takes positive action on health & welbeing.	
	BTHFT Equality, Diversity & Inclusion Strategy 2023-2025 including our approach to addressing 'Health Inequalities'	
2B: When at work, staff are ree from abuse, narassment, bullying and	"Zero Tolerance to Abuse" Presentation on the Trust' violence prevention/ security management outlining how the Trust supports the safety and wellbeing of staff and including the Trust policy on 'Withholding treatment from violent & abusive patients'	Achieving (score 2)

Outcome	Evidence	Rating
physical violence from any source	<ul> <li>2022 Staff Survey Highlights including employee views on areas of good practice/ areas of concern.</li> </ul>	
	<ul> <li>BTHFT Safeguarding Policy and training.</li> </ul>	
	<ul> <li>Overview of Employee Relations data (formal complaints and outcomes relating to Harassment &amp; Bullying).</li> </ul>	
	Violence prevention and reduction task & finish group	
	<ul> <li>Good Recruitment Practice: leaflet highlighting the need for rigorous processes when hiring new employees, specifically;</li> </ul>	
	<ul> <li>Pre-employment screening – why pre-employment checks are so important in ensuring the health, safety and well-being of applicants and patients. Providing assurance that applicants are appropriately qualified and are who they say they are.</li> </ul>	
	<ul> <li>Recruitment processes – Our robust recruitment process is detailed in training for managers and ensures we attract/ retain a diverse pipeline and carry out necessary checking of knowledge, experience and requirements that are free from discrimination.</li> </ul>	
	Workplace Civility: communications/ toolkit/ training/ drama based training videos.	
	Workforce Race/ Disability Equality Standard results, analysis and action plans.	
	<ul> <li>BTHFT Equality &amp; Diversity Council Terms of Reference (chaired by Mel Pickup, Chief Executive)</li> </ul>	
	<ul> <li>Staff Equality Networks: Providing a voice for our diverse staff at a strategic level, raising the profile of Race/ Disability/ LGBT+ equality and seeking to address issues raised through network members lived experience.</li> </ul>	

Outcome	Evidence	Rating
	<ul> <li>Equality Census: Enabling the collection, retention and analysis of personal diversity information for staff with the aim of highlighting and addressing potential inequalities.</li> <li>BTHFT Equality, Diversity &amp; Inclusion Strategy 2023-2025 (including our strategic EDI objectives): Highlighting our EDI ambitions, our activity, approach and progress</li> <li>NHS EDI Improvement Plan: Focus on eliminating the conditions and environment in which bullying, harassment and physical harassment occurs</li> <li>Managers EDI Briefing: Half day face-to-face course for line managers providing direction, guidance and safe space discussion around their role and remit in relation to EDI at BTHFT (including focus on Workplace Civility 'nipping issues in the bud' and providing support and guidance to staff.</li> <li>NHS Workforce Disability Equality Standard "Enable &amp; Inspire" Innovation Fund Project: inclusion project (booklet and video)</li> </ul>	
2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source	<ul> <li>Number of staff accessing the Vita Health Group (employee assistance programme)</li> <li>Health, Wellbeing &amp; Attendance Management Toolkit: contains information on independent support available to employees (e.g. Occupational Health, Vita Health)</li> <li>Dear Erica: postbox/ facebook page providing banks and agency staff the opportunity to provide feedback to the Trust and engage with teams and wards they are supporting.</li> <li>Veteran Support: support offered within the Trust, including signposting to VCSE organisations.</li> <li>Staff Advocacy Service Poster</li> </ul>	Achieving (score 2)

Outcome	Evidence	Rating
	Workplace Mediation Services leaflet	
	<ul> <li>Freedom to Speak Up: data and comms demonstrating this as an established support service across the organisation.</li> </ul>	
	Spiritual, Pastoral and Religious Care (SPaRC) service offering support and guidance to patients and staff in need, regardless of religion or belief.	
	• Overview of the Trust Wellbeing Offers (from the People Promise Manager)	
	Data around appraisal, wellbeing conversations and Thrive Portal activity	
	<ul> <li>Staff Equality Networks leaflet and role descriptor – supporting staff and raising the profile of disability, race and LGBT+ equality across the Trust (including protected time for core group members)</li> </ul>	
	<ul> <li>Key Staff Support Policies with an EDI focus: Disability Equality &amp; Disability Leave/ Trans Equality for patients &amp; staff/ Harassment &amp; Bullying</li> </ul>	
	<ul> <li>BTHFT Equality Impact Assessment pro forma and guidance, including new/ existing policy approval checklist (highlighting the requirement for completion of Equality Impact Assessment).</li> </ul>	
	Equality Impact Assessment for the Disability Equality Policy: highlighting involvement of the enable Staff Equality Network as part of the review process.	
2D: Staff recommend the organisation as a place to	• Nursing Times Workforce Summit Award 2023: nomination and award for "Best Employer for Diversity & Inclusion"	Achieving (score 2)
work and receive treatment	■Let's Talk – Review of 2023	

Outcome	Evidence	Rating
	<ul> <li>BTHFT Equality, Diversity &amp; Inclusion Strategy 2023-2025: including our strategic EDI objectives and showcasing staff engagement and support.</li> </ul>	
	• 2022 Staff Survey Results "Staff Recommend BTHFT as a place to work and receive treatment".	
	<ul> <li>Staff Survey EDI analysis presentation to People Academy outlines comparison data for BAME, LGBT+ and disabled staff against other staff and how this was used to identify priorities and next steps.</li> </ul>	
	<ul> <li>Connected on Ability festival: demonstrates partnership working (Act as One) to raise the profile of disability equality and better the experiences of all staff.</li> </ul>	

Overall	Score for	Domain 2
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Achieving (score 8)

## Domain 3: Inclusive Leadership

Outcome	Evidence	Rating
3A: Board members, system leaders (Band 9 and VSM) and those with	<ul> <li>BTHFT Equality, Diversity &amp; Inclusion Strategy 2023-2025: including our strategic EDI objectives and our approach to addressing Health Inequalities</li> </ul>	Achieving (score 2)
line management responsibilities routinely demonstrate their understanding of, and	Photographs/ Comms evidencing Board member attendance at religious/ cultural celebration events	
commitment to, equality and health inequalities	Equality & Diversity Council reports to Trust Board	
	<ul> <li>Equality &amp; Diversity Council Terms of Reference, example meeting notes and example presentation slides</li> </ul>	
	EDI Improvement Plan: 6 high impact actions (with deadlines) demonstrating BTHFT commitment to include EDI objectives in senior manager appraisals by end March 2024	
	Leadership & Organisational Development Presentation featuring:	
	<ul> <li>Reach-in Reach-out initiative</li> <li>Leadership Development Pathways (and guiding principles)</li> <li>Management essentials modules (including refreshed EDI training for line managers/ Recruitment &amp; Selection training with increased focus on EDI)</li> <li>Advancing Leaders development pathway (includes; 'self' session, unconscious bias, Lumina Learning Psychometric products and covers the core principles of valuing diversity)</li> </ul>	
	<ul> <li>Managers EDI Briefing: half day face-to-face course for line managers providing direction, guidance and safe space discussion around their role and remit in relation to EDI at BTHFT</li> </ul>	

Outcome	Evidence	Rating
	<ul> <li>(including focus on Workplace Civility 'nipping issues in the bud' and providing support and guidance to staff.</li> <li>Reciprocal Mentoring Programme Guide: positive action aimed at providing development opportunity to those who are under-represented at senior management levels and a reciprocal learning process for learning partners at senior management level.</li> </ul>	
3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed.	<ul> <li>Board Assurance Framework (BAF) – reports to People Academy and Trust Board (risk 3.3 relates to EDI)</li> <li>Board/ Committee/ Academy papers referencing EDI/ Health Inequalities impacts.</li> </ul>	Achieving (score 2)
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.	<ul> <li>2022 Staff Survey Results Report and Action plan</li> <li>Board Assurance Framework reports to People Academy and Trust Board (risk 3.3 relates to EDI)</li> <li>Workforce Race &amp; Disability Equality Standard (WRES/ WDES) reports/ presentation to People Academy and Trust Board and minutes of meetings</li> <li>Health Inequalities update presentation and reports to Quality &amp; Patient Safety Academy.</li> </ul>	Achieving (score 2)

<ul> <li>y, Diversity &amp; Inclusion Strategy 2023-2025 presentation to Trust Board (March nd minutes of the meeting</li> <li>Stories (reports/ presentations to Trust Board and minutes of meetings)</li> </ul>	
Stories (reports/ presentations to Trust Board and minutes of meetings)	
Academy Chair reports/ presentations to Trust Board and minutes of gs	
nequalities and Waiting List analysis reports/ presentations to Finance & nance Academy and Trust Board, and minutes of meetings.	
aff Survey Results for the People Promise elements highlighting the Trust	
e as above average for 'We are compassionate and inclusive'.	
	aff Survey Results for the People Promise elements highlighting the Trust e as above average for 'We are compassionate and inclusive'.

**Overall Score for Domain 3** 

Achieving (score 8)

## Appendix 3: Third Party Involvement in Domain 3 Review

Trade union reps:	Invitation taken to Joint Negotiating Committee. Staff Engagement event attended by Catherine Healey and Shirley Rainford.
Independent Evaluators and Peer Reviewers:	Airedale Hospitals NHS Foundation Trust (EDS 2022 leads: Sajan Sathyan and Katherine Duke)

## Appendix 4: Bradford Teaching Hospitals NHS Foundation Trust EDS Organisation Rating (overall rating)

Total EDS rating for BTHFT	
Domain 1: Score 8 Domain 2: Score 8 Domain 3: Score 8	Achieving (Overall EDS score: 24)

## Appendix 5: EDS Action Plan

EDS Lead	Kez Hayat, Head of Equality, Diversity & Inclusion
Year or years active	2024/ 2025
EDS Sponsor	Mel Pickup, Chief Executive
Authorisation date	28 <sup>th</sup> February 2024

Domain	Outcome	Objective	Action	Completion date
ces.	1A: Patients (service users) have required levels of access to the service	Ensure policy and practice is consistent across all departments in terms of meeting the needs of diverse patients.	Continue to develop the work under the Accessible Information Standard and particularly around the roll out of staff training and awareness.	February 2025
provided servi			Share feedback with CSU's/ departments through the Health Inequalities work ongoing in the Trust to ensure this is considered as part of the HEAT (resources and e-learning).	February 2025
Domain 1: Commissioned or provided services.	1B: Individual patients (service users) health needs are met	To increase awareness around neuro-diverse patients and their needs	EDI Team to work with the Accessible needs team around their plans to develop/ roll out training to staff around neurodiversity.	December 2024
			EDI team to work with the Accessible needs team and the Enable staff network to develop comms and engagement to raise the profile of disability equality, specifically understanding of hidden disabilities/ neurodiversity.	February 2025
			To mark Neurodiversity Celebration Week (18 <sup>th</sup> – 25 <sup>th</sup> March 2024) and other relevant international celebrations.	February 2025

### Domain 1: Commissioned or provided services.

Domain	Outcome	Objective	Action	Completion date
	1C: When patients (service users) use the service, they are free from harm	Strengthen our understanding of any disparities associated with protected characteristics or health inclusion groups, in relation to ensuring patients are free from the risk of harm.	Patient Experience team to work with Informatics on improving the quality of data in Risk Incident reporting, facilitating break down by protected characteristic and service area.	December 2024
			Ensure staff are empowered and trained in meeting the needs of patients with additional needs.	February 2025
	1D: Patients (service users) report positive experiences of the service	Provide further opportunities for the Trust to showcase good practice and engage with a diverse range of patients/	Patient Experience team to continue with the implementation of their Patient Experience & Engagement Strategy	Ongoing
		communities with a view to gathering feedback based on their lived experience	Services to work on improving their approach to equality monitoring of patient experience (e.g. Friends & Family test) and focus on reporting data in a way that is meaningful for service improvement.	February 2025
			EDI Team to work with the patient experience team to maximise the impact of the 2024 /2025 EDS2022 review process.	June 2024

Domain	Outcome	Objective	Action	Completion date
oeing.	2a) Staff are provided with support to manage obesity, diabetes,	Occupational Health waiting times to be reduced.	Work with the Health & Wellbeing Manager to develop a strategy for improvement.	August 2024
	asthma, COPD, and mental health conditions.	More managers to adopt inclusive and compassionate leadership styles.	Continue with the roll out of the face-to-face EDI training for managers.	Ongoing
alth & Welll		Reduce 'lip service' and encourage proactive approaches to staff wellbeing.	Focus on ensuring existing staff support offers are better communicated across the organisation.	August 2024
Domain 2: Workforce Health & Wellbeing.	2b) Staff are free from abuse, harassment, bullying and physical violence from any source.	Policy and practice to be applied consistently across the organisation (with focus on communication and training for line managers)	Ensuring a comprehensive Trust-wide launch and communications plan for the refreshed Respect, Civility & Resolution Policy	August 2024
Domain 2:		Managers need to be empowered and enabled to deal effectively with EDI in the workplace.	Focus on ensuring existing staff support offers are better communicated across the organisation.	August 2024
			Continue with the roll out of the face-to-face EDI training for managers and the selection of workplace civility training to be delivered to all managers across the Trust.	Ongoing

Domain	Outcome	Objective	Action	Completion date
	2c) Staff have access to independent support and advice when suffering from stress, abuse, bullying, harassment,	All staff to be supported consistently (both clinical & non-clinical)	Ensuring communications around the launch of the new Respect, Civility & Resolution Policy (and any related training) reach <u>all</u> staff (both clinical & non-clinical)	August 2024
	and physical violence from any source.	Increase awareness of hidden disabilities	Work with the Enable staff equality network to raise the profile of disability equality across the Trust, with particular focus on hidden disabilities.	February 2025
		Staff who are abused or harassed should be supported adequately and in a timely manner.	Focus on ensuring existing staff support offers are better communicated across the organisation.	August 2024
	2d) Staff recommend BTHFT as a place to work and receive treatment.	Increase awareness of professional behaviours in the workplace.	Continue with the roll-out of the Workplace Civility training and awareness raising around the Trust People Charter.	Ongoing
		Ensure we have a representative workforce across the Trust.	Work in collaboration with our staff equality networks to achieve those actions outlined in our WRES action plan.	March 2025

## Domain 3: Inclusive Leadership

Domain	Outcome	Objective	Action	Completion date
Domain 3: Inclusive Leadership.	3a) Board members, system leaders (Band 9&VSM) and those with line management responsibilities routinely demonstrate their understanding of, and commitment to equality and health inequalities.	Managers at Board level and for	Focus on ensuring every board and executive team member have EDI Objectives that are specific, measurable, achievable, relevant and timebound (SMART) and be assessed against these as part of their annual appraisal process (aligned to the NHS EDI Improvement Plan high impact actions) Ensuring Trust Board involvement in EDI related activity continues to be	March 2024 Ongoing
main 3: Inclus			featured in Trust-wide communications on a regular basis and consider how this information reaches <u>all</u> staff groups.	
Q	3b) Board/ committee papers (including minutes) identify equality and health related impacts and risks, and how they will be mitigated and managed.	To ensure equality impact assessments are being completed and any potential negative impact is minimised.	To ensure comprehensive EIA's are being conducted and actions are being monitored with the overall aim of negative impact being minimised.	Ongoing

system leaders (Band 9 & VSM) ensure levers are in place to manage	More focus on psychological safety for staff in raising concerns and with consistent approaches to policy and practice	Creating safe spaces for staff to share their concerns without fear of reprisal (focus on FTSU/ Staff Equality Networks), ensuring Trust Board are fully sighted on issues through existing mechanisms.	December 2024
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