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Equality Information Annual Update Report

March 2018

# Equality & Diversity Update Annual Report – March 2018

# Accessibility Statement

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# Introduction

The CCG has embraced its equality duties, rather than simply focus on legal compliance, it has dedicated its efforts to achieving meaningful outcomes for our staff, patients and all those we engage with.

This Equality Information Report demonstrates how NHS Hull Clinical Commissioning Group (CCG) is meeting its public sector equality duties and NHS England equality standards. The report goes beyond compliance, to reflect our equality programme of work. We recognise this is an on-going journey of development and improvement and welcome feedback and views on how we are doing.

This report will:

* Set out our equality public sector duties and how we have responded to these
* Provide our response to NHS England Equality Standards
* Set out our governance arrangements for delivering our equality objectives and reviewing performance
* Highlight achievements and progress against our equality objectives for 2016 – 2019
* Identify areas where improvement or progress is still needed
* Define our objectives for 2019 – 2023

# Legal Context and Equality Objectives

NHS Hull Clinical Commissioning Group is committed to promoting equality and eliminating discrimination as an employer, and in ensuring the services we commission are accessible and inclusive. We recognise our duties under the Human Rights Act 1998 and the Equality Act 2010, including the Public Sector General Equality Duty to pay due regard to:

1. Eliminating unlawful discrimination, harassment and victimisation. This includes sexual harassment, direct and indirect discrimination on the grounds of a protected characteristic.
2. Advancing equality of opportunity between people who share a protected characteristic and people who do not share it. This means:
   * Removing or minimising disadvantage experienced by people due to their personal characteristics
   * Meeting the needs of people with protected characteristics
   * Encouraging people with protected characteristics to participate in public life or in other activities where their participation is disproportionately low
3. Fostering good relations between people who share a protected characteristic and people who do not share it, which means:
   * Tackling prejudice, with relevant information and reducing stigma
   * Promoting understanding between people who share a protected characteristic and others who do not
4. Having due regard means considering the above in all the decision making, including:
   * How the organisation acts as an employer
   * Developing, reviewing and evaluating policies
   * Designing, delivering and reviewing services
   * Procuring and commissioning
   * Providing equitable access to services

The specific equality duties were updated by The Equality Act 2010 (Specific Duties and Public Authorities) Regulations 2017. These regulations also introduced requirements for public bodies to publish information in relation to gender pay equality.

**The specific duties are:**

1. Gender pay gap reporting:
   1. *Applicable to all public bodies with 250 or more employees*
   2. *Utilising data from 31st March 2017 to analyse and publish by 30th March  2018 and annually thereafter*
   3. *Publish the information in a manner that is accessible to all its employees  and to the public, for a period of at least three years beginning with the date of publication.*
2. Publication of information demonstrating compliance with s149(1) Equality Act 2010:
   1. *Publication must include information relating to persons who share a relevant protected characteristic who are; i. its employees (providing it employs 150 or more employees); ii. other persons affected by its policies or practices.*
   2. *Publish information not later than 30th March 2018.*
   3. *Subsequently at intervals of not greater than one year beginning with the  date of last publication*
3. Preparation and publication of one or more, specific and measurable, Equality   Objectives;
   1. *Published not later than 30 March 2018 (aligning to any current Equality Objective commitments).*
   2. *Subsequently at intervals of not greater than four years beginning with the date of last publication.*

## Protected Characteristics

The protected characteristics referred to in the Act are:

* **Age**, which refers to a person of any age group
* **Disability**, including persons with a physical or mental impairment where the impairment has a substantial long-term adverse effect on that person’s ability to carry out day-to-day activities
* **Sex** (gender), refers to a man or a woman
* **Gender reassignment,** which refers to a person proposing to or has undergone a process in relation to physiological or other attributes of sex, with the aim of aligning gender identity
* **Pregnancy and maternity**, this includes protection from discrimination when someone is pregnant, or after they have given birth. It includes protection for breastfeeding mothers
* **Race**, including ethnic or national origins, colour or nationality
* **Religion or belief**, including a lack of religion or belief, and where belief includes any religious or philosophical belief
* **Sexual orientation**, meaning a person’s sexual orientation towards persons of the same sex, persons of the opposite sex and persons of either sex
* **Marriage and civil partnership**, refers to marital or civil partnership status, but in terms of assessing equality impact, only has relevance when a policy or decision includes criteria related to a person’s marital or civil partnership status.

# NHS England Equality Standards

## Equality Delivery System (EDS2)

As set out in the section above, our equality objectives and outcomes were developed using the EDS as a framework to engage with local interest groups and listen to their experiences. More information about our approach and outcomes can be found here: <http://www.hullccg.nhs.uk/equality-delivery-system-eds2/>.

In 2019 we will work look at how we can work more effectively in partnership to implement the EDS in a way that makes best use of resources and brings together different perspectives. We will seek to involve those we work closely with, such as providers of NHS services and the local authority, as well as a range of other local interest groups who represent and can reflect the experiences of local patients.

## Workforce Race Equality Standard (WRES)

The WRES requires organisations to demonstrate progress against a number of indicators of workforce equality, including a specific indicator to address the low levels of BME Board representation. We recognise our role in asking providers to report on their performance against the WRES framework from 1July 2015, as well as paying due regard to the standard in its own workforce practices

Implementing the Accessible Information Standard has been incorporated into our equality objective 1 (see Equality Objectives on page 6 below).

# Governance and Management Arrangements

All our staff know that it is everybody’s responsibility to promote equality, diversity and inclusion. This is reflected in our [Equality and Diversity Policy 2017](http://www.hullccg.nhs.uk/wp-content/uploads/2017/06/equality-and-diversity-policy-v2.2.pdf), staff training and equality objectives aligned to Personal Development Reviews (PDRs).

In addition to this, the Associate Director of Corporate Affairs is our executive lead for equality. Our Equality & Diversity Action Plan is regularly reviewed by a Equality & Diversity Performance Review Group consisting of:

* Jason Stamp, Lay Member for Public and Patient Engagement.
* Mike Napier, Associate Director of Corporate Affairs.
* Sue Lee, Associate Director of Communications and Engagement.
* Sarah Smyth, Director of Quality and Clinical Governance/Executive Nurse.
* Amanda Heenan, independent Equality & Diversity Consultant.

Quarterly reports are presented to the Quality & Performance Committee, with annual reports going to our Board. The Board has annual Equality & Diversity development sessions.

# Reporting Information

## Gender Pay Gap Reporting

The CCG employs 74 staff as at 30 December 2017 and therefore is not subject to this reporting duty. However, we do regularly analyse our workforce data, including pay band by gender. Salaries are reviewed by our Remuneration Committee, which follows national guidelines and best practice.

Our [Annual Report](http://www.hullccg.nhs.uk/uploads/chronicler/document/document/802/WEBSITE_VERSION_-_2017_Hull_CCG_Annual_Report.pdf) includes a salary and information report, which lists the salaries and total remuneration received by members of the CCG Board. The CCG pay profile is also reviewed quarterly by the Senior Leadership Team.

## Workforce Reporting

As above, the workforce reporting duty applies to employers with more than 150 staff. However we do capture and analyse data relating to the protected characteristics of staff and our Board. This is considered on a quarterly basis by the Senior Leadership Team of the CCG.

## Information about people affected by the CCG

The CCG, works with our partners and the people of Hull to commission services and improve the health of the people and communities of Hull. The CCG’s programmes are based on evidence about the about the population, with a focus on health needs and inequalities. These include:

* People, communities and place – our plan for Hull.
* My city, My health, My care – the future of GP services in Hull.
* Delivering the Five year Forward View – commissioning services for Hull.
* Better care in Hull - through integration with the local authority.
* Delivering safe, high quality services.
* Building relationships with communities.
* Taking action on health inequalities and the local strategy for health and wellbeing.

The CCG has also developed a health information resource to support staff and partners in undertaking effective equality impact analysis. This is a developing resource of equality related research, and information. See: <http://www.hullccg.nhs.uk/health-information-and-resources-3/>

## Equality Objectives

Our equality objectives were developed through extensive engagement with staff and local interest groups primarily through implementing the Equality Delivery System (EDS2). Our EDS2 findings have also supported the development of specific outcomes and success measures. For more information about how we implement the EDS see: <http://www.hullccg.nhs.uk/equality-delivery-system-eds2/>

A summary of progress against the equality objectives and outcomes is considered by the Quality & Performance Committee at regular intervals throughout the year.

**Objective 1: Ensure patients and public have improved access to information and minimise communications barriers**

**Achievements:**

* The CCG continues to fund an interpretation and translation service so that patients of primary care and other health services receive consistent access to high quality interpretation support. The CCG has engaged a new provider of this service, AA Global, and monitors both the uptake and quality of the service. This also enables us to get a detailed insight into which languages are being requested and where they are being requested.
* The CCG has joined a joint provider forum with a focus on encouraging collaboration and best practice. Specific areas of focus will be implementation of the Accessible Information Standard and effective equality impact assessments
* The CCG also works in partnership with other CCGs in the region to engage with groups and individuals representing specific communications access needs (e.g. East Riding CCG).
* The CCG has briefed GP Practices about the Accessible Information Standard through various channels, including attendance at Practice Manager meetings. Further training sessions focusing on the Accessible Information Standard are planned for 2018/19.
* Hull and East Riding’s new eConsult service provides opportunities to use technology to help overcome many communication barriers. This will be further explored and assessed in 2018/19
* The CCG has reviewed its own accessible communications and has made significant changes to its website to make information more accessible and easier to read (see: <http://www.hullccg.nhs.uk/making-our-information-accessible/>). All documents can be made available in different formats on request. We also have guidelines for booking events that include ensuring communications access needs are met.

**Areas for development:**

To improve, we need to:

* Continue to work closely with GP practices to ensure the communications needs of patients are being met (via the Accessible Information Standard for disabled patients, and for patients with other language needs)
* Explore further and assess the potential of eConsult to minimise or remove communication barriers
* Work in partnership with providers and other CCGs to engage with patients and interest groups about communications access barriers
* Develop partnerships with providers, CCGs, the local authority and the voluntary sector to keep the focus on accessible communications and promote best practice
* Develop accessible communications ‘mystery shoppers’ to assess how well patient experience communications support is provided
* Develop the skills of CCG staff to better understand and meet the requirements of the Accessible Information Standard.

**Objective 2: To ensure and provide evidence that equality is consciously considered in all commissioning activities and ownership of this is part of everyone’s day-to-day job**

**Achievements:**

* Engagement with patients, the public, local interest groups and other stakeholders is at the heart of what we do. This year we achieved the [HSJ CCG of the Year Award](http://www.hullccg.nhs.uk/2017/11/23/nhs-hull-ccg-scoops-ccg-of-the-year-in-health-sectors-top-awards/). Judges were looking for evidence of real engagement with the local population with a focus on commissioning care that puts the patient first alongside long term healthcare planning. Examples of how we engage with the diverse communities in Hull can be found in our 2016/17 Annual Report and Accounts and our 2016 – 17 Communications and Engagement Annual Report.
* Two examples of major pieces of engagement work undertaken by the CCG in this period are: The review of Short Breaks provision for children with special education needs and disabilities where we worked very closely with the Hull Parents Forum (parents and carers of children with special edicational needs and disabilities) to develop and appropriate engagement approach and questionnaires / focus groups etc. The other has been taking a co-production approach to reviewing the Down’s Syndrome pathway working with a local Down’s Syndrome Support Group, parents and carers of children with Down’s Sydrome, people living with Down’s Sydrome and health professionals working with people with Down’s.
* Effective equality impact assessment (EqIA) is an important way of paying due regard to equality across all the CCGs policies and functions. Significant progress has been made this year to ensure staff have the tools and skills to support them with this. The EqIA process was rigorously reviewed by engaging with staff developing policies and across commissioning functions. New guidelines and templates were developed to more naturally fit with these different organisational functions. A series of half day training workshops were delivered this year. Uptake was very good, with attendance of 36 staff from a range of roles, not just those directly responsible for EqIAs. There has been significant improvement of the quality of EqIAs as well as enhanced general insight and awareness of equality, diversity and inclusion.
* The EqIA quality assurance and sign off process of has also been reviewed, and this will continue to be refined and assessed in 2018/19
* We seek assurance through the contract monitoring process that our providers are meeting their equality standards (e.g. the Workforce Race Equality Standard (WRES), Equality Delivery System (EDS2), the Accessible Information Standard, and the Workforce Disability Equality Standard (WDES) from 2018/19
* Equality objectives have been more explicitly included in the staff appraisal process. Each member of staff is asked to set at least one equality objective and this will form part of their personal development.

**Areas for development**:

To improve we need to:

* Continue to review and refine the EqIA quality assurance process
* Continue to support and coach staff completing EqIAs and develop capacity of staff to provide peer review and coaching as part of their own development and meeting their equality objectives
* Celebrate and communicate good practice
* Develop an engagement structure to review our equality performance and help develop our future priorities. An Equality Reference Group was established as a result of EDS2 engagement. However, it was agreed that this needed further development, and to look at working in partnership with the local authority, East Riding CCG and providers to either reframe an existing equalities group to ensure that it is fit for purpose, or to develop a new joint group to cover health and local authority services across the Hull and East Riding area.

**Objective 3: Recruit and maintain a well-supported, skilled workforce, which is representative of the population we serve**

**Achievements:**

**Recruitment**

* While recruitment levels in general have been low, our focus has been on strengthening the recruitment process to so that job opportunities are advertised widely and locally, using our community engagement networks and advertising through the local Jobcentres
* We have signed up to the DWP[[1]](#footnote-1)’s Disability Confident scheme (formerly Two Ticks Positive about Disability), which requires the following commitments:
  + Inclusive and accessible recruitment
  + Communicating vacancies
  + Offering an interview to disabled people
  + Providing reasonable adjustments
  + Supporting existing employees

We have joined the scheme as a Level 2 member, which means that we commit to go that extra mile to remove employment barriers experienced by disabled people

* We have initiated a work experience programme this year, with a very successful year 11 work placement from a local school and there are plans this year for work experience to be through the Prince’s Trust Get into the NHS programme. A previous work experience trainee from the Prince’s Trust, successfully obtained an apprenticeship with the CCG and during this period was supported to achieve an NVQ level 2 in business administration. This individual has now been appointed to a full time position and continues to be supported in their learning and personal development.
* We have engaged with ‘[This Ability’](http://www.this-ability.org.uk) and People’s awareness of Disability and Difference (PADD) to explore opportunities for Work Experience placements.
* We are exploring ways of making the online NHS Jobs application process more accessible, and are awaiting an update from NHS England regarding the development of easy read application forms. We will also analyse online applications that are started but not submitted.

**Supporting staff:**

* We’ve made a commitment as a [Mindful Employer](http://www.mindfulemployer.net) to support the mental health and wellbeing of our staff. Mental Health First Aid champions have been identified and training to take place this year
* Following the results of recent staff surveys, a Staff Survey Action Group was established which has now become the Staff Health and Wellbeing Group (at their request). This in an active group of a cross section of staff committed to support and challenge the CCG to make improvements where there areas of concern for staff as well as developing a proactive approach to staff health and wellbeing.. An action plan is in place, and this is regularly reported to the Senior Management Team as well as the Equality & Diversity Review Group.
* The CCG’s 2017 Staff Survey had a 73% response rate and the CCG was rated highest overall in its peer group for overall satisfaction. All respondents said that they had undertaken their statutory and mandatory training and there was an increase in numbers reporting improvement in communication between staff and senior management from 58% in 2016 to 75.5% in 2017.
* The Staff health and Wellbeing group has incorporated the red “Priority Action Areas” and amber “Secondary Action Areas” into its action plan for 2018/19 and have already had a staff consultation day on these action areas. The Health & Well Being Group will be presenting to the CCG Board the results and plan going forward for the next year on 23 March 2018.

**Areas for Development**

To improve, we need to:

* Keep our focus on achieving a more diverse workforce and continually assess the impact of the recruitment initiatives identified above
* Continue to focus on our Disability Confident and Mindful Employer commitments
* Work closely with the Staff Survey Action Group to ensure that equality themes and outcomes are shared and acted upon
* Review the equality objectives identified by staff as part of the PDR process and incorporate themes into our Equality & Diversity Action Plan
* Develop partnership arrangements with CCGs in the Y&H region to enable us to collectively report on WRES and WDES, as we all have small numbers of staff, which makes reporting information and identifying trends challenging. We will also explore opportunities to develop shared action plans and peer review of progress (as an employer as well as seeking through our commissioning function to seek assurance from providers).

**Objective 4: Ensure that NHS Hull Clinical Commissioning Group is welcoming and inclusive to people from all backgrounds and with a range of access needs**

As we have developed our equality and inclusion programme, we see that this objective is an overarching vision and aim that is achieved through continued focus on our other objectives, and commitment to continuous review and improvement.

## New Equality Objectives 2019 - 2023

Will continue to deliver against the following objectives:

1. Ensure patients and public have improved access to information and minimise communications barriers
2. To ensure and provide evidence that equality is consciously considered in all commissioning activities and ownership of this is part of everyone’s day-to-day job
3. Recruit and maintain a well-supported, skilled workforce, which is representative of the population we serve
4. Ensure that NHS Hull Clinical Commissioning Group is welcoming and inclusive to people from all backgrounds and with a range of access needs

In addition, and recognising the increasing alignment between health and social care services, and other partnerships across the region, we have set an additional objective:

1. To demonstrate leadership on equality and inclusion and be an active champion of equalities in partnership programmes or arrangements

1. Department for Work and Pensions [↑](#footnote-ref-1)