

Bradford District Care

NHS Foundation Trust

Action Plan - Domain 1: Commissioned or Provided Services

Outcome 1A: Patients (service users) have required levels of access to the service

- The BI Team and the EDI team will complete an analysis of the Palliative Care caseload in Spring 2025, with the EDI team to support the Palliative Care team to identify any actions to understand any groups of underrepresentation.
- As part of PCREF Data & Insights workstream, complete analysis of caseloads across Community Mental Health Teams, who refer into PH&W and IHTT, to understand underrepresentation of any ethnically diverse communities.
- Developing reporting that monitors access by demographic groups as part of health inequality approach.
- Data quality is good for ethnicity, gender and deprivation but not for other demographics such as religion and sexual orientation. EDI team to work with BI team and services to improve data quality to allow for assessment of access by different protected characteristics.
- Recognising underrepresentation, particularly of the Pakistani community, within these caseloads, include improving access for this group as a local priority within the PCREF action plan.
- In partnership with VCSE organisations, such as the Ethnically and Culturally Diverse Communities programme (delivered by Mind and Staying Put), develop targeted outreach for underrepresented communities including advertising of the First Response service and exploring ways to improve referrals into the Physical Health & Wellbeing team for those with SMI.

Outcome 1B: Individual patients (service users) health needs are met

- Roll out Cultural Competency & Humility Training for staff, initially offering 4 sessions initially in 2025.
- Deliver bespoke training for Intensive Home Treatment Team and Physical Health & Wellbeing on accessing interpreting services, enabling staff to feel confident in accessing and using our interpreting providers and reporting incidents when they have concerns.
- Creation of case study on the provision of culturally and spiritually appropriate care within palliative care services.
- Identifying an EDI influencer within each service, to ensure that best practice is shared and key information is cascaded across the organisation.
- Develop a case study on the ULCP-Primrose study in PH&W clinics and how this project increases access to physical health checks, social prescribing and statin prescriptions for people with SMI most at risk of cardiovascular disease.



 Develop link between PH&W and dentistry to ensure people with SMI are signposted to appropriate services and explore how physical health checks could incorporate dental health.

Outcome 1C: When patients (service users) use the service, they are free from harm

- Develop EDI flag within incident reporting system and dashboard to ensure that EDI related incidents are visible to the EDI team and monitored.
- Developing comms campaign which supports roll out and ongoing use of EDI flag within IRE reporting.
- Deliver training for the IHTT on equality impact assessments, supporting members of the team to develop these where appropriate to evidence that equity is embedded within policies and processes.
- Understand interoperability issues which prevent incident and complaints data from being broken down by demographic and work with the relevant teams to identify both short term mitigations and a long-term solution.

Outcome 1D: Patients (service users) report positive experiences of the service

- Following roll-out of new FFT system, include demographic breakdowns within reporting.
- Complete a baseline assessment of FFT data for IHTT and PH&W in March, following roll out of new FFT system, including analysis by demographic group and identifying appropriate actions to implement learning from feedback received.
- Explore appropriate service-level feedback mechanism for First Response / IHTT, including asking about experiences of access.
- Work with PCEI team to ensure FFT data for the Physical Health and Wellbeing clinics is separate to the wider CMHTs to ensure the team have access to service-specific feedback.