

People and Culture Committee 16.01.25

Paper title:	Equality Delivery System 2022 (EDS22) Domains 2 and 3 Assessment 2025			Agenda Item
Presented by:	Lisa Wright Head of Equality, Diversity and Inclusion (EDI) and Brontë Dines-Allen EDI Project Officer			XX
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Committees where content has been discussed previously Strategic Staff EDI Partnership. Staff Side Partnership. West Yorkshire Mental Health Collaborative.		e.		
Purpose of the paper Please check <u>ONE</u> box only:		☑ For approval☐ For discussion	☐ For informa	ation

Relationship to the Strategic priorities and Board Assurance Framework (BAF)		
The work contained with within the BAF	this report contributes to the delivery of the following theme	:S
Being the Best Place	Looking after our people	Υ
to Work	Belonging to our organisation	Υ
	New ways of working and delivering care	Υ
	Growing for the future	Υ
Delivering Best Quality	Improving Access and Flow	Υ
Services	Learning for Improvement	Υ
	Improving the experience of people who use our services	Υ
Making Best Use of	Financial sustainability	Υ
Resources	Our environment and workplace	Υ
	Giving back to our communities	Υ
Being the Best Partner	Partnership	Υ
Good governance	Governance, accountability & oversight	Υ

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Purpose of the report

This report provides the evidence and final draft self-assessment grades of the 2024 EDS22 Domains 2 and 3 for approval. The assessment has concentrated on workforce health and wellbeing and inclusive leadership.

Executive Summary

The EDI team has led an assessment of the Trusts EDI performance using the EDS22 framework for domains 2 and 3. The assessment focuses on seven outcome measures relating to workforce health and wellbeing and inclusive leadership. The evidence collected has been assessed and consulted on to provide a final draft score for approval at the committee. These scores are as follows:

EDS Domain	Final Draft Score
Domain 2	8 this is an increase of 1 point since 2024
Domain 3	6 this is an increase of 1 point since 2024
Total	14

A full breakdown of the rationale behind these draft scores and the evidence to support them is included in **appendix 1, 2 and 3.** These scores are added to the EDS22 Domain 1 scores to provide an overarching score for the Trust. That overarching score for 2023 is 22 which means within the EDS22 definitions the Trust is 'achieving'. The recommended actions that will further the EDS22 rating are included in **appendix 4.** The paper containing domain 1 scores and evidence went to the Quality and Safety Committee on 15.01.25.

A broad engagement process has been undertaken to develop these scores. Details of this is set out for information in **appendix 4**.

Once approved the reporting templates will be published on the BDCFT website and shared with NHS England before 28.02.25.

Do the recommendations in this paper
have any impact upon the requirements
of the protected groups identified by the
Equality Act?

\boxtimes	Yes	(please set out in your paper what
		action has been taken to address this

□ No

Recommendation(s)

The People and Culture Committee is asked to:

- Approve the scores and EDS22 Template Reports for publication and submission to NHS England.
- Approve the action plan set out in Section 4.



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Links to the Strategic Organisational Risk register (SORR)	The work contained with this report links to the following corporate risks as identified in the SORR:	
Care Quality Commission domains Please check <u>ALL</u> that apply	☑ Safe☑ Caring☑ Effective☑ Well-Led☑ Responsive	
Compliance & regulatory implications	The following compliance and regulatory implications have been identified as a result of the work outlined in this report: • Equality Act 2010 and associated regulations • NHS Equality Delivery System 2022 • NHS Workforce Equality Standards • Pay Gap requirements • NHS EDI Improvement Plan • Health Inequalities Statutory Duties • Patient and Carer Race Equality Framework	





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Equality Delivery System 2022 (EDS22) Domains 2 and 3 Assessment 2025

1 Purpose

In 2022 NHS England launched EDS22. This was an updated version of the former EDS2¹ which the Trust has used to measure performance relating to our equality compliance since 2015. The new framework has been aligned to NHS England's Long-Term Plan, the NHS Workforce Race Equality² and Disability³ Standards and its commitment to an inclusive NHS that is fair and accessible to all.

NHS22 implementation by NHS provider organisations is mandatory in the NHS Standard Contract. A template is now provided to report through. Once completed the template should be shared with NHS England and published as a key piece of evidence for Equality Act Compliance by 28.04.24 and then annually on that date.

The EDS22⁴ is an improvement tool for patients, staff and leaders of the NHS. It supports active conversations with the people using NHS services, carers, staff, staff networks, community groups and trade unions to review and develop organisational approaches to addressing health and workforce inequalities.

There are 11 outcomes spread over three domains: services, workforce and leadership. The outcomes are evaluated, scored and rated using available data, evidence and insight through engagement. It is these ratings that provide assurance or point to the need for equality improvement. The outcomes are individually rated and scored either 'underdeveloped activity', 'developing activity', 'achieving activity' or 'excelling activity'. A final score is calculated which becomes the Trusts EDS rating.

Overall responsibility for the EDS lies with the Executive Board within each organisation. This responsibility may be discharged to the/an EDI Team/senior responsible officer within the organisation, but Board members should retain overall responsibility. It is stated within the technical guidance that organisations should select a Board champion for EDS BDCFT's champion is the Chief People Officer who holds the EDI portfolio. A draft EDS score should be presented to the Trust Board for constructive challenge prior to approval and publication.

¹NHS England » Equality Delivery System for the NHS – EDS2

² NHS England » NHS Workforce Race Equality Standard

³ NHS England » Workforce Disability Equality Standard

⁴ NHS England » Equality Delivery System 2022 – Guidance and resources.



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The completion of the EDS, and the creation of interventions and actions plans in response to the EDS findings contribute to NHS organisations achieving delivery on the <u>Core20PLUS5</u> <u>approach to reducing healthcare inequalities</u>, the five Health Inequalities Priorities, and addressing inequalities in elective recovery highlighted in the 22/23 Guidance and set out below:

- Priority 1: Restore NHS services inclusively
- Priority 2: Mitigate against digital exclusion
- Priority 3: Ensure datasets are complete and timely
- Priority 4: Accelerate preventative programmes that proactively engage those at greatest risk of poor health outcomes
- Priority 5: Strengthen leadership and accountability

There is specification within the framework to work collaboratively with place NHS partners and within the Integrated Care Systems (WYICS). The Head of EDI has been working with the West Yorkshire Integrated Care System EDS22 to agree a methodology and evidence sources to appraise scores and ratings. This proposal has been shaped alongside Bradford NHS Teaching Hospitals and the WYICS equality commissioning lead.

This paper focuses on domain two and three. Domains one will be considered at the Quality and Safety Committee. A peer review process has taken place on these domains with local mental health Trusts to ensure parity in scoring across the West Yorkshire footprint.

2 Proposed Outcome

A comprehensive exercise to gather data, qualitative information, to benchmark and engage with the workforce and partners has been undertaken. A summary of that process and the outcome is included in **appendix 4**. It comprised of face to face and online discussions, peer review, online surveys, desk top report and data analysis. Data has been taken from the electronic staff record, staff survey, staff network feedback and reports and national benchmark reports. A self-assessed score was generated by cross referencing the data and qualitative feedback based on the EDS22 scorecard ⁵. This has then been shared and tested with stakeholders and a final score drafted for approval.

The scores are as follows:

Domain 2: Workforce Health and Wellbeing		
Outcome	Draft Score	
2A: When at work, staff are provided with support to manage obesity,	3	
diabetes, asthma, COPD and mental health conditions.		
2B: When at work, staff are free from abuse, harassment, bullying and	1	
physical violence from any source.		
2C: Staff have access to independent support and advice when suffering	3	
from stress, abuse, bullying harassment and physical violence from any		
source.		

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⁵ EDS Ratings and Score Card Guidance (england.nhs.uk)



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2D: Staff recommend the organisation as a place to work and receive treatment.	1
Domain Total	8
Domain 3: Inclusive Leadership	
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.	3
3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed.	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.	1
Domain Total	6

The domains 2 and 3 scores have been added to the domain 1 scores giving the Trust an overall EDS22 score of 22 which is 'achieving' within the framework. A detailed report of all the evidence collected is included in appendix 1 and 2.

3 Options

The EDS22 Action Plan is included in **appendix 4**. Actions include:

- Publication and submission of the EDS22 reporting templates to NHS England and on the BDCFT website.
- Implement new methods to analyse and evaluate the take up of the Trusts wellbeing offer by equality groups to measure impact and target interventions further. Develop a set of objectives to go into the Belonging and Inclusion plan. Establish a governance process for our wellbeing offers effectiveness.
- Target the Managing racial and other types of discrimination training into teams where data shows there are hotspots in abuse.
- Input into the redevelopment of LMH to ensure all opportunities to create an environment that prevents and limits abuse is designed.
- Develop specific interventions to respond to the Aspiring Cultures Staff Network survey about the organisations response to racial abuse.
- Work with system partners to share good practice and develop shared resources.
- Target the wellbeing offer into hotspot areas to support staff affected by abuse, harassment, bullying and physical violence.
- Deliver the Building Inclusive Teams Training and develop team charters based on the Trusts behaviours.
- Continue to develop the EDI Training Offer.
- Support the staff networks to engage strategically in a two-way dialogue about lived experiences and support interventions.



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- Develop specific interventions to respond to the Aspiring Cultures Staff Network survey about the organisations response to racial abuse.
- Advertise the many routes for independent support.
- Continue with People Matters Drop Ins and Wellbeing Walkabouts. Include staff network representation where possible.
- Develop a package of support for staff affected by employee relations cases.
- Continue to develop, implement, evaluate and measure the impact of the EDI Training Offer.
- Support the staff networks to engage strategically in a two way dialogue about lived experiences and support interventions.
- Continue to collect evidence of Board members consideration and commitment to EDI and associated impacts.
- Launch the Health Equity Approach and associated governance / leadership processes.
- Continue to embed the use of equality impact assessments for all projects, develop and monitor health inequalities metrics at Quality and Safety Committee and associated groups.
- Identify health inequalities KPI's for the Patient and Carer Race Equality Framework and Health Equity Approach.
- Enhance the committee paper and policy templates to prompt and capture more information about Health Equity.
- Establish the EDI Influencers Programme, continue to develop the network.

There has been much development around domains 2 and 3 with an increase in Trust scores for 2C and 3B. Highlights that have created this increase in the scores are:

The development of the Health Equity Approach and Patient and Carer Race Equality Framework and associated support mechanisms, the influence and impact of the Trusts staff networks and the role that Board Sponsors are playing in their development, increase in resources allocated to the EDI agenda across the organisation, establishment of the EDI Influencers, staff resources and training offer.

A full update of activity and impact was provided to the People and Culture Committee in November 2024.

4 Risk and Implications

The Trust has strong policy, strategy and frameworks in place to support EDI. The Trusts wellbeing offer was the most comprehensive available. The training and information on offer to support EDI developments and progress are wide ranging and of good quality.

There is strong evidence of open and honest conversations about EDI issues both strategically, operationally and in influential networks. The relationship between the Trust Board and Senior Leadership Team and the staff networks is reciprocal, respectful and effective.

There are ongoing challenges in ensuring that the resources, strategy and policy intentions and expectations are embedded fully in every service and for every member of staff. There is evidence that services that have stretched capacity and lower access to regular information



technology are less likely to know about the resources, policy and strategy supporting the Trusts EDI aspirations and expectations. Our 2025 – 2028 Belonging and Inclusion Plan launching in Spring 2025 targets our wellbeing and training offers into these 'quiet places'.

It is still vitally important to make EDI part of everything we all do at the Trust to embed the good practice available and identify where more progress and intervention is required.

5 Results

This information has been shared with staff side representatives. It has been to the Strategic EDI Staff Partnership which involves the Trusts staff networks for discussion, discussions have been facilitated for colleagues to comment on the information.

Ongoing progress and reporting will be brought to the People and Culture Committee in November 2025. Actions agreed will be embedded into the EDI objectives, NHS workforce Standards and are in the new Belonging and Inclusion Plan. All of which are reported throughout the year.

Lisa Wright Head of EDI, Brontë Dines Allen EDI Project Officer 19.12.24

