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NHS Equality Delivery System 2022 EDS Reporting Template

Version 1, 15 August 2022

Contents

Equality Delivery System for the NHS 2
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Equality Delivery System for the NHS

The EDS Reporting Template

Name of Organisation	Buckinghamshire Oxfordshire and Berkshire West Integrated Care Board	Organisation Board Sponsor/Lead		
		Rachel Corser, Chief Nursing Officer (Doiman		
		Caroline Corrigan, Acting Chief People Officer		
Name of Integrated Care System	Buckinghamshire Oxfordshire and Berkshire West ICS	(Domain 2) Catherine Mountford, Director of Governance (Domain 3)		

Implementation of the Equality Delivery System (EDS) is a requirement on both NHS commissioners and NHS providers. Organisations are encouraged to follow the implementation of EDS in accordance EDS guidance documents. The documents can be found at: www.england.nhs.uk/about/equality/equality-hub/patient-equalities-programme/equality-frameworks-and-information-standards/eds/

The EDS is an improvement tool for patients, staff and leaders of the NHS. It supports NHS organisations in England - in active conversations with patients, public, staff, staff networks, community groups and trade unions - to review and develop their approach in addressing health inequalities through three domains: Services, Workforce and Leadership. It is driven by data, evidence, engagement and insight.

The EDS Report is a template which is designed to give an overview of the organisation's most recent EDS implementation and grade. Once completed, the report should be submitted via <u>england.eandhi@nhs.net</u> and published on the organisation's website.

NHS Equality Delivery System (EDS)

EDS Lead	Yasmin Mahmood		At what level has this been completed?		
				*List organisations	
EDS engagement date(s)			Individual organisation	Buckinghamshire Oxfordshire and Berkshire West ICB (For Domain 2)	
			Partnership* (two or more organisations)	For Domain 1 – with Royal Berkshire NHS Foundation Trust For Domain 3 – with South Central Ambulance Service NHS Foundation Trust	
			Integrated Care System-wide*		

Date completed	January 26 th 2024	Month and year published	February 28 2024
Date authorised	February 12 2024	Revision date	

Completed actions from previous year				
Action/activity	Related equality objectives			
(N/A) – This is the first year the ICB is undertaking this activity.				

Please refer to the Rating and Score card supporting guidance document before you start to score. The Rating and Score Card supporting guidance document has a full explanation of the new rating procedure, and can assist you and those you are engaging with to ensure rating is done correctly. Scoring criteria is on

Score each outcome. Add the scores of all outcomes together. This will provide you with your overall score, or your EDS Organisation Rating. Ratings in accordance to scores are below

Those who score under 8, adding all outcome scores in all domains, are rated Undeveloped
Those who score between 8 and 21 , adding all outcome scores in all domains, are rated Developing
Those who score between 22 and 32 , adding all outcome scores in all domains, are rated Achieving
Those who score 33 , adding all outcome scores in all domains, are rated Excelling

Evidence template for Domains 1-3

Domain 1: Commissioned/Provided service: Two maternity pathways have been reviewed in partnership with Royal Berkshire NHS Foundation Trust: Ante Natal Screening at 10 weeks and Post Natal care.

The Ante Natal Screening review was aimed at ensuring that all service users have equal access to maternity care services and have booked their pregnancy by 10 weeks.

The BOB Assurance and Stakeholder Group and BOB LMNS board would have oversight over the following actions identified by Royal Berkshire NHS Foundation Trust.

Learning from the EDS can be shared across our maternity and neonatal system through EDI and transformation work, the LMNS SAAG and LMNS Equity and Prevention Group.

Domain	Outcome	Evidence	Rating (to be finalised with stakeholders)	Owner (Dept/Lead)
services – Ante Natal hire NHS Foundation	1A: Patients (service users) have required levels of access to the service	 How to book your pregnancy with maternity services Ability to access online booking form/use telephone to book an appointment by 10 weeks gestation. Appointment availability Appointment Location 	1 - Developing	E.Williams/Matron Maternity
or provided Royal Berks Trust	1B: Individual patients (service users) health needs are met	 Patient Information Leaflets. Support for staff to care for service users with protected characteristic. antenatal sickle cell and thalassaemia screening Booked by 10 weeks pregnant 	1 – Developing	E.Williams/Matron Maternity and D.Marshall/Head of Maternity Compliance
mmission 10 weeks	1C: When patients (service users) use the service, they are free from harm	 Delay in booking appointment Delay in booking bloods (screening test) Interpreter usage 	2 - Developing	E.Williams/ Matron Maternity and Kathryn Jones/Community Lead Midwife
Domain 1: Co Screening at	1D: Patients (service users) report positive experiences of the service	 MNVP feedback Blossom Team Seeking Sanctuary Complaints and Serious Incidents (SI's) 	2 – Developing	E.Williams/ Matron Maternity and Jo Sharp/Patient Safety Lead

Domain 1: Commisioned/Provided service: All service users to have equal access to maternity services and other organisations that provide postnatal support once discharged from the ward or from home birth.

Domain	Outcome	Evidence	Rating (to be finalised with stakeholders)	Owner (Dept/Lead)
ed services – Post Foundation Trust	1A: Patients (service users) have required levels of access to the service	 Information on how to access services- translated, easy to read versions. Information on who to contact when for support Appointment Location Know when required emergency help – how to access 	1- Developing activity	G.Roberts/D.Marshall Antenatal and postnatal Lead Midwife/Head of Maternity compliance
ioned or provid Berkshire NHS	1B: Individual patients (service users) health needs are met	 Patient Information Leaflets shared Handover of care to primary care and Health Visitor 	1- Underdeveloped activity	K.Jones/ E.Williams Community Lead Midwife/Matron Maternity
Commiss e at Royal	1C: When patients (service users) use the service, they are free from harm	 Missed Community Midwife Visits Postnatal Readmissions women and birthing people Postnatal readmission babies Interpreter usage 	1-Developing activity	K.Jones/ E.Williams/D.Marshall
Domain 1: (natal Care	1D: Patients (service users) report positive experiences of the service	MNVP feedbackComplaintsNational Survey	1- Developing activity	S.Bailey/ Head of Midwifery and E.Williams/ Matron Maternity

Domain 1: Commissioned or provided services overall rating (Post Natal Care)	4- Developing activity	Average rating for Domain1: 5

Domain 2	Outcome	Evidence used	Rating	Owner (Dept/Lead)
Domain 2: and well-being – BOB ICB	2A: When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions	Feedback from: NHS Staff Survey 2022-23 responses to Q11a (health and wellbeing) EDS Stakeholder Group, comprising staff network and trade union reps, members from HR and OD team and interested staff. Numbers attending REACT Mental Health Training, Inclusive Wellbeing webinars Information/comms on flu and covid vaccination offer for staff	0	People Directorate?
Domain 2: Workforce health and well-being	2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source	NHS Staff Survey 2022-23 responses (Q14a,14b, 14c and 14d – related to bullying and harassment) – overall and disaggregated by race and disability - WRES and WDES). Information shared on: HR Policies on bullying and harassment. OUH No Excuses campaign which was shared with PCN leads. Sexual Safety Charter.	1	People Directorate + Communications

		Employee Assistance Programme: 24hr Confidential Helpline: 0800 028 0199 Online Portal: healthassuredeap.com, Mobile App Registration Code - MHA228876 Freedom to speak up Guardian through dedicated email ID: bobicb.ftsu@nhs.net Staff Networks (CARE and Diverse Ability), with two more planned(LGBT+ and Women)		
ind wł bu	C: Staff have access to adependent support and advice then suffering from stress, abuse, ullying harassment and physical olence from any source	 Information shared with Domain2 Stakeholder panel: Employee Assistance Programme / Staff Support Service, 24hr Confidential Helpline: 0800 028 0199, Online Portal: healthassuredeap.com Freedom To Speak Up Guardian - bobicb.ftsu@nhs.net Two staff networks – CARE and Diverse Ability, with two more planned (LGBT+ and Women) Trade Union representatives: Unison. Unite, RCN and BMA – contact details on intranet. 	1	People Directorate

	2D: Staff recommend the organisation as a place to work and receive treatment	NHS Staff Survey 2022-23 results on People Promise themes of Staff Engagement were analysed and shared with Stakeholder panel (in particular, advocacy, motivation and involvement.	1	Executive Management Team
Domain 2: Workforce health and well-being overall rating		3	Executive Management Team	

Domain 3: Inclusive leadership

Domain 3	Outcome	Eviden	се	Rating	3	Owner (Dept/Lead)
lea tho res der and hea BOB ICB 3B: (ind and imp be 3C: lea leve per	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	and No	Objectives agreed by Executives n Executives and executive rship for key areas of work.	1-	Developing	Chief Executive and Chair, supported by Director of Governance
	3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed	conside	f 16 papers between 2023-24 ered by stakeholder panel. Papers d those approved by Board and tees.	1-	Developing	Director of Governance
	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	Forward	d Plan for all committees	1-	Developing	Director of Governance
Domain 3:	Inclusive leadership overall rating	1		3 - Dev	veloping	
	Third-party involvement in Domain 3 rating and review					
Trade Union Rep(s): Unite representative			Independent Evaluator(s)/Peer Reviewer(s): Head of ED&I, South Central Ambulance Service NHs Foundation Trust			D&I, South Central

EDS Organisation Rating (overall rating): 11 - Developing

Organisation name(s): Buckinghamshire Oxfordshire and Berkshire West ICB

Those who score under 8, adding all outcome scores in all domains, are rated Undeveloped

Those who score between 8 and 21, adding all outcome scores in all domains, are rated Developing

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Those who score 33, adding all outcome scores in all domains, are rated Excelling

EDS Action Plan (based on EDS – to be finalised after approval)				
EDS Lead: BOB ICB and ICS ED&I Programme Manager	Year(s) active – 2.8 years			
EDS Sponsor – Chief Nursing Officer/Chief People Officer/Director of Governance	Authorisation date: Feb 2 nd 2024			

Domain	Outcome	Objective	Action	Completion date
provided ening	1A: Patients (service users) have required levels of access to the service	All service users to have equal access to maternity services, and to have booked their pregnancy by 10 weeks	Easy Read leaflets 'How to book your pregnancy'- including visuals and who professionals are- mw's role etc 'who's who' roles and responsibilities	Apr-24
or			Flowchart of 'what to expect during pregnancy journey'	Mar-24
mmissionec Ante-Natal (Review location and times of clinics- alongside 'How to get here' guides	Apr-24
Commissioned s – Ante-Natal S			Videos of RBH team 'what service will look like' using workforce from across trust to show diversity	Apr-24
ר 1: vices			Easy English Videos/evaluation/classes	Jan-24
Domain 1: service			Posters in pharmacies, supermarkets 'Book before 10 weeks' explaining cost of care required/free-potential LMNS wide?	Apr-24

			Review what white other means	Apr-24
			Citizenship?	Jul-24
	1B: Individual patients (service users) health needs are met	All service users to have equal access to maternity services, and to	Review data for booking by protected characteristic	Jul-24
		WEEKS	Network within different groups of service users	Aug-24
			Improve trust within health professionals	Jul-24
			Cultural competence training	Aug-24
			Early signposting	Jul-24
			Option to have No GP to book	Aug-24
	1C: When patients (service users) use the service, they	All service users to have equal access to maternity services, and to	Review interpreter usage and access.	Jul-24
	are free from harm	have booked their pregnancy by 10 L	Leaflet/information to explain importance of screening tests and time limits	Jul-24
	1D: Patients (service users) report positive experiences of the service	All service users to have equal access to maternity services, and to have booked their pregnancy by 10 weeks	Improve links with service users from different protected characteristics or representatives.	Ongoing
Domain 1	Outcome	Objective		Completion date
	1A: Patients (service users)	All service users to have equal		Jul-24
: ned d ost		access to maternity services and		Aug-24
in 1 sior /ide – P	to the service	other organisation's that provide postnatal support once discharged from the ward or from home birth.	Making sure information doesn't get lost in postnatal, MH 'flow chart of information' – not overloading information	Jul-24
Doma Commiss or prov services			Supporters' information to empower them if concerned about woman/Baby including mental health	Jul-24

		'Buddy system' – community champion/Link Worker/befriender role	Jul-24
		Information on discharge- visual/ easy read- contact numbers/ 'safety netting'- Easy English	April-24
		MNVP onto wards/ befriender roles and look at other volunteer services	Jul-24
		Videos- support in postnatal period- translated/Easy English	Aug-24
		Review role of community support- social prescribing	Aug-24
1B: Individual patients (service	All service users to have equal	What has impact?	Aug-24
	other organisation's that provide	Specialist support for still births	Aug-24
		Raising awareness of talking therapies, parental groups	Aug-24
	from the ward or from home birth.	Signpost-online services e.g. education and council	Aug-24
1C: When patients (service	All service users to have equal	Review Data by protected characteristic	June 24
users) use the service, they are	access to maternity services and	Review missed visits	June 24
	other organisation's that provide postnatal support once discharged from the ward or from home birth.Postnatal demo's-bath etc-Physica support Inclusive language-mother and	Postnatal demo's-bath etc-Physical support	June 24
			June 24
		Resources Ready for pregnancy/parenthood	June 24
		Review numerous leaflets	Dec -24
		Removing stigma's around children services	Dec -24
		communal space-TV, peer support	March 24
		partners staying over night	March 24
		Label-my name is. My baby is	March 24
		Cultural awareness of needs in postnatal period-prayer rooms	July 24

		Service users wishes regarding visiting hours.	March 24
· · · · · · · · · · · · · · · · · · ·	All service users to have equal access to maternity services and	More face to face postnatal care	Aug-24
the service	other organisation's that provide postnatal support once discharged from the ward or from home birth.	More care for supporting the baby	Aug-24

Domain 2	Outcome	Objective	Action (to be agreed)	Completion date
Domain 2: Workforce health and well-being	2A: When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions	Improve access to health and wellbeing support	 Raising awareness of wellbeing support available to staff. Scope plan for lunch time webinars on managing COPD, diabetes, asthma and mental health. Providing updated guidance on reasonable adjustments, with latest information on Access to Work Grants. Scope centralised budget to support reasonable adjustments as part of Change programme (Oxleas NHS Trust Model). Scope feasibility of providing Staff MOT/Health Checks. Increased promotion of flu vouchers along with other health benefits through staff handbook, intranet and line managers. 	2024/25

2B: When at work, staff are free from abuse, harassment, bullying and physical violence from any source	Promote culture of respect at the workplace	 (1) Set up an inclusion steering group – comprising ED&I and wellbeing champions from each directorate to strengthen internal assurance. (2) Increasing visibility of ICB values and Behaviour framework. (3) Support and strengthen staff networks – providing access to leadership development to members. (4) Guidance for managers on holding wellbeing and inclusion conversations at 121s, appraisals, team and directorate meetings. (5) ED&I awareness and training for ICB staff including: Cultural Intelligence, Disability Confidence, Neurodiverseity, LGBT Inclusion and related leadership development CPD programmes offered by NHS Elect and NHS England. This would be complemented by celebratory History Month workshops. Targetted positive action programmes to be scoped and agreed. (6) Reinforcing positive behaviour from staff and public through awareness campaigns, conflict resolution coaching and use of restorative just culture principles. 	2024/25
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	 (7) Update Harassment & Bullying policy to reflect ICB context, with links to associated policies. (8) Update grievance policy to include clear procedure, with timescales, for managing complaints. 	
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2C: Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source	 (1) Raise awareness of full set of staff support services through induction packs, intranet and quarterly spotlights at All Staff Forum, staff partnership forum, networks, directorates and through comms. To include: FTSU Guardian EAP Helpline Trade Union representatives Mediators (external) Mental Health First Aiders Quarterly comms, spotlight during key months (2) Support for staff paturation of the service of	2024/25
	(2) Support for staff networks on responding to personal crises.	
	(3) Staff networks and FTSU-G to seek annual feedback from members/staff to update workplan.	
	 (4) Increase visibility (internal and external) on all work on wellbeing and ED&I, using intranet and website. 	
	(5) Conflict resolution coaching for staff/manager	
	(6) Establish Inclusion steering group to build internal capabilities and	

cascade information to directorates.	
(7) OD Plan on ED&I to cover – Learning and development, staff engagement, leadership development, flexible working and ED&I assurance framework.	

2D: Staff recommend the organisation as a place and receive treatment	e Develop staff advocacy through inclusion reward and recognition schemes	(1) Annual Staff Award Programme, to include categories on wellbeing and inclusion. Monthly staff/team recognition to feature inclusion and wellbeing good practice.	2024/25
		(2) Discussion series with managers on ways to promote belonging within teams using Cultural Intelligence and other frameworks through Leadership Forum.	
		 (3) Promote opportunities for continuous personal development (NHS Elect offer) + internal training offer on ED&I and wellbeing. 	
		 (4) Scope Leadership Development Programmes for under- represented groups (covered under . 	
		(5) Ensure ICB Change process adopts fair, transparent processes through equality impact assessments, inclusive recruitment and implementation of Gender Pay Gap recommendations to build staff confidence and advocacy.	
		(6) Update, signpost and promote staff benefits offer: Flexible	

	working, cycle to work scheme, free wellbeing apps, eye test and flu vouchers and CPD offer).	

Domain	Outcome	Objective	Action (to be agreed)	Completion date
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	Strengthen Inclusive Leadership governance and accountability	 (1) All Board Members (Executives and Non Executives) to set Equality Objectives as part of Board Assurance Framework. (2) VSMs and senior managers with line managers set equality objectives through appraisal process. (3) Executive sponsors to attend staff networks and external meetings with local groups to inform Board discussions. (4) Board seminar topics to incorporate EDI and health inequalities. 	March 31 2024 Ongoing 2024/25
	3B: Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed		 (1) Governance team to ensure all relevant Board and committee papers need to reflect analysis done equality/health inequalities, key findings and proposals to address them. (2) Minutes to capture summary of decision on reports affecting protected groups or health inequalities. 	2024/25

3C: Board members and system leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff	(1) All key committees to have a forward plan identifying timeline for key reports on health inequalities and workforce ED&I reports.	Q1 2024
and patients	(2) Set up internal Inclusion steering group for assurance.	

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