
EDS2 Action Plans 2018:

This report contains the 2018 action plans for the EDS2 Report for Somerset Partnership and Taunton and Somerset NHS Foundation Trusts. These will be combined followed a review of the EDS2 for the combined Trust in 2020.

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Somerset Partnership Equality Delivery System 2 Action Plan
Reviewed and updated July 2018

EDS2 Goal:	EDS2 Outcome:	Proposed actions:	Progress:	By:
1. Better health outcomes for all	1.1 Services are commissioned, procured and delivered to meet the health needs of local communities.	<ul style="list-style-type: none">• Further engagement with patients about our developing plans as part of the Sustainability Transformation Plan.	A People's Panel was established with representatives from community groups, including carers, the elderly, young people, and other condition-specific groups. This work was stood down in August 2018 by the CCG, while they developed their Health & Social Care Strategy.	June 2018
		<ul style="list-style-type: none">• Develop engagement with Mental Health Service Users to plan and implement new ways of working to support this patient group.	The Somerset Mental Health Hub have been commissioned to deliver a Stakeholder Engagement Forum for 2018-19. The Mental Health & Learning Disabilities Division have put Participation Workers in place from April 2018.	June 2018

EDS2 Goal:	EDS2 Outcome:	Proposed actions:	Progress:	By:
	1.2 Individual people's health needs are assessed and met in appropriate and effective ways.	<ul style="list-style-type: none"> Care Planning Audits will be undertaken during the year. 	Trust-wide Personalised care planning audits planned, data collection November 2018, covering both community based and inpatient based services	June 2018
	1.3 Transitions from one service to another, for people on care pathways, are made smoothly with everyone well-informed.	<ul style="list-style-type: none"> Work with other organisations in Somerset as part of the Sustainability Transformation Plan work will improve the way we work and communicate together. 	The Trust continues to work as a key stakeholder of the STP work streams and the Providers' Reference Group. Our work developing the Alliance with TST has a strong focus on easing and simplifying transitions and seamless patient care.	June 2018
	1.4 When people use NHS Services their safety is prioritised and they are free from mistakes, mistreatment and abuse.	<ul style="list-style-type: none"> Review our approach to investigating serious incidents and unexpected deaths. 	<p>The serious incident process has undergone a full review:</p> <ul style="list-style-type: none"> A cohort of investigators have received RCA training The RCA template has been changed to reflect national standards. The serious incident review group has been realigned to ensure a timely overview of serious incidents. <p>All unexpected deaths are reviewed and investigated or reviewed depending on cause.</p>	November 2017
		<ul style="list-style-type: none"> Complaints and Serious Incidents will be monitored against all nine protected characteristics. 	Serious incidents as part of the investigation may determine if any concerns associated with the event however no formal monitoring in place.	March 2018

EDS2 Goal:	EDS2 Outcome:	Proposed actions:	Progress:	By:
	1.5 Screening, vaccination and other health promotion service reach and benefit all local communities.	<ul style="list-style-type: none"> Improve patient information to ensure people are aware of these services and are able to access them. 	Working with Healthwatch to get access to their patient readers' panels to review and improve patient information	March 2018
		<ul style="list-style-type: none"> Include subtitles on any new public information videos 	No new public information videos produced.	March 2018
2. Improved patient access and experience	2.1 People, carers and communities can readily access hospital, community health or primary care services and should not be denied access on unreasonable grounds.	<ul style="list-style-type: none"> We will carry out training in sight loss awareness in our community hospitals. 	Not delivered to date, new role of Head of Learning currently being advertised who will pick up responsibility of all learning moving forward.	March 2018
		<ul style="list-style-type: none"> The Trust will work closely with its commissioners to ensure its services are designed and delivered closest to the point of need and continue to support the principle of care closest to home. 		March 2018

EDS2 Goal:	EDS2 Outcome:	Proposed actions:	Progress:	By:
	2.2 People are informed and supported to be as involved as they wish to be in decisions about their care.	<ul style="list-style-type: none"> We will continue to provide interpretation and translation support to patients and their families. 	Interpretation and translation service available to support a range of patient communication needs including other languages, BSL and braille.	June 2018
		<ul style="list-style-type: none"> The Trust will continue to improve and review the information it gives to patients to ensure it meets their diverse needs. 	Working with Healthwatch to get access to their patient readers' panels to review and improve patient information	June 2018
	2.3 People report positive experiences of the NHS.	<ul style="list-style-type: none"> Commission Community Mental Health Survey and progress action plan. 	The survey was completed and the results presented to the PPI Group. An action plan is in place to undertake further work, to improve access to crisis care and peer support.	June 2018
		<ul style="list-style-type: none"> Friends and Family Test 	We have a new provider of the FFT data collection software and some services have moved to bespoke real-time FFT data collection. New posters have been designed which services are displaying in their public areas and using for learning.	Monthly
		<ul style="list-style-type: none"> Contribute to Healthwatch reports 	The Trust has contributed to Healthwatch reports by responding to all information requests, continuing to meet with Healthwatch representatives and ensuring Healthwatch has a seat at our PPI Group and other relevant groups.	As needed.
	2.4 People's complaints about services are handled	<ul style="list-style-type: none"> The Trust will carry out a survey of complainants in 2017 to obtain their feedback about the complaints process. 		April 2018

EDS2 Goal:	EDS2 Outcome:	Proposed actions:	Progress:	By:
	respectfully and efficiently.	<ul style="list-style-type: none"> The Trust will provide its PALS and Complaints leaflets in British Sign Language on its website. 		April 2018
3. Empowered, engaged and well-supported staff	3.1 Fair NHS recruitment and selection processes lead to a more representative workforce at all levels.	<ul style="list-style-type: none"> Complete a review of our existing Recruitment and Selection Policy. Review existing recruitment and selection training arrangements. 	A full review of recruitment was carried out during 2017 with improvements made to process and training delivered to managers as part of roll out of trac. Policy to be reviewed as part of joint working across alliance.	December 2017 December 2017
	3.2 The NHS is committed to equal pay for work of equal value and expects employers to use equal pay audits to help fulfil their legal obligations.	<ul style="list-style-type: none"> Collect, analyse and publish our gender pay position. 	2017 / 2018 gender pay reporting complete.	April 2018
	3.3 Training and development opportunities are taken up and positively evaluated by the staff.	<ul style="list-style-type: none"> Conduct a review of our existing appraisal processes with a particular emphasis on the quality of experience. Conduct a review of our non-mandatory training offer 	Full review of appraisal process and non-mandatory training being carried out jointly with Taunton and Somerset NHS Foundation Trust to be completed by January 2019	April 2018 April 2018

EDS2 Goal:	EDS2 Outcome:	Proposed actions:	Progress:	By:
	3.4 When at work, staff are free from abuse, harassment, bullying and violence from any source.	<ul style="list-style-type: none"> We will review all existing measures / practices in place to protect staff from harassment / bullying or abuse from patients, relatives or the public and ensure that any emerging issues are addressed. 	Reviewed approach to freedom to speak up guardians in place.	April 2018
	3.5 Flexible working options are available to all staff consistent with the needs of the service and the way people lead their lives.	<ul style="list-style-type: none"> Monitor leavers questionnaire data to assess whether any groups are experiencing adverse impact in respect of attempts to secure flexible working. 	Revised leavers survey process being implemented as part of the people strategy.	April 2018
	3.6 Staff report positive experiences of membership of the workforce.	<ul style="list-style-type: none"> We will work to develop a Health and Wellbeing strategy, with a proactive focus on the management of staff health and wellbeing. We will continue to collect and monitor feedback from colleagues via Staff Friends and Family and other surveys in respect of how it feels to work at the Trust 	Wellbeing strategy developed and in place. Friends and family process re-launched as part of the new pulse check process.	December 2017 Ongoing

EDS2 Goal:	EDS2 Outcome:	Proposed actions:	Progress:	By:
4. Inclusive leadership at all levels	4.1 Board and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations.	<ul style="list-style-type: none"> Introduce a new programme of multi-disciplinary development. 	Board development day commissioned for Autumn 2018	April 2018
	4.2 Papers that come before the Board and other major Committees identify equality-related impacts including risks, and say how these risks are to be managed.	<ul style="list-style-type: none"> Monitor inclusion of equality impact assessments as part of Board paper submissions 	Board papers are monitored to assure EIA carried out appropriately where relevant.	March 2018
	4.3 Middle managers and other line managers support their staff to work in culturally competent ways within a work environment free from discrimination.	<ul style="list-style-type: none"> Conduct a comprehensive analysis of the Staff Survey results by gender, disability and ethnic origin. 	To be picked up as part of the improvement project	April 2018

Key to RAG Rating:

Green	Green	Achieved
Green	Amber	Work is in progress in line with target date
Amber	Amber	Initial work has commenced appropriate to target date
Amber	Red	Minimal or no work has commenced in this area due to the long lead time
Red	Red	Actions have not been achieved by the target date
Grey	Grey	Responsibility allocated to agencies outside of the Trust

Taunton and Somerset NHS Foundation Trust Equality Delivery System 2 Action Plan
Reviewed and updated July 2018

Goal	Number	Description of outcome	RAG rating	Sources of evidence/assurance	Further actions required/ Priorities	Time-frame
1. Better health outcomes	1.1	Services are commissioned, procured, designed & delivered to meet the health needs of the communities	Developing	<p>The Trust delivers services commissioned mostly by Somerset CCG and by NHS England. These organisations design services according to evidence of local/national community need.</p> <p>Service provision by the Trust is responsive both to community need and patient feedback. For example, all capital schemes (new buildings, changes to patient environment etc) are subject to extensive consultation with users including, where appropriate, patient representation on working groups etc. Care plans for patients note individual characteristics, with care delivery altered as a result.</p> <p>There are a range of measures in place on site reflective of the needs of a diverse population (e.g. prayer facilities, Kosher/Halal meals, accessible buildings etc).</p> <p>Where services are procured by the Trust, suppliers are selected as per clear rules, and are required to adhere to strict standards including those related to Equality and Diversity.</p> <p>The Trust's service delivery is ultimately accountable to its Board of Governors, drawn from the extensive membership which is a body which is diverse and representative of the Somerset community.</p> <p>Business cases and other cases for investment specifically ask for details on the E&D impact of proposals, and their impact on those with one of the protected characteristics</p> <p>Introduction of the LGBTQ group.</p>	We will review approved business cases to make sure that any service changes where E&D impacts are identified have these mitigated, with review as part of ongoing benefits realisation work	April 2019
	1.2	Individual people's health needs are assessed and met in appropriate and effective ways	Developing	<p>Range of evidence available relating to provision of individualised care. This is against primarily against protected characteristics age, disability, religion and belief and race.</p> <p>Care and risk documentation includes individual patient plans.</p>	<p>Ongoing specific work plans.</p> <p>Developing the collection of information against the protected characteristics.</p>	April 2018

				<p>Examples of work plans for Dementia, Vulnerable Adults and Children and Learning Disability.</p> <p>Individual passports evidence of reasonable adjustments.</p> <p>Chaplaincy service is multi-faith.</p> <p>Care after Death Policy Includes meeting religious/faith/personal considerations.</p> <p>Evidence of external assurance including CQC inspection during 2016 which was particularly complimentary around how patients with learning disabilities are supported.</p> <p>Assurance reports via QAC which sets out the detailed references within the CQC inspection.</p> <p>Assurance report to QAC in April 2017 which was rated as blue.</p> <p>Monitoring of satisfaction of complaint handling, patient satisfaction surveys, Carers survey (includes protected characteristics)</p>		
1.3	Transitions from one service to the other, for people on care pathways, are made smoothly with everyone well-informed	Developing	<p>Plan of work overseen by Discharge group- Lead Operational ADN.</p> <p>Pathways and transitions evidence:</p> <ul style="list-style-type: none"> • Somerset Patient Centred Care Project • End of Life • Discharge • Children's services • Maternity Services 	On-going work plans		
1.4	When people use NHS services their safety is prioritised and they are free from mistakes, mistreatment and abuse	Developing	<p>Sign up to Safety Work Programme covers the quality of patient care and services and will be refocused via the patient safety improvement board from 2017/2018.</p> <p>Safeguarding programme of work.</p>	Consider how groups are considering their work from the perspective of the various protected groups.		

				<p>Work programme in place around safety of patients with mental health needs including training for front line colleagues and those areas that are high risk.</p> <p>Staff survey 2017 working group.</p> <p>Freedom to speak up guardians in place from 2017.</p> <p>Learning from serious incident review group so that mistakes aren't repeated.</p>		
	1.5	Screening, vaccination and other health promotion services reach and benefit all local communities	Developing	The Trust is not directly responsible for the provision of most screening, vaccination and health promotion services (which are, in the main, provided at Primary Care / public health level). However, where such activities are provided by the Trust, the needs of the whole community are borne in mind. Evidence includes the delivery of screening services from locations across the County to benefit those for whom travel is more difficult, and the provision of services at times to suit diverse needs.	Specific Equality and Diversity assessment of all such services delivered / planned to be delivered by the Trust	RB
2. Improved patient access & experience	2.1	People, carers and communities can readily access hospital, community health or primary care services and should not be denied access on unreasonable grounds	Developing	<p>Achieving on the basis of providing services as per commissioning requirements.</p> <p>Provision of Translation and Interpretation services.</p> <p>Developing provision of information in other languages, and formats.</p> <p>Core information available in different languages and formats.</p> <p>Ability to develop specific individualised plans</p> <p>Patient environment is accessible for those with disabilities, managed through the hospital environment committee.</p> <p>Patient facilities on-site reflect diverse needs e.g. dietary / prayer facilities</p> <p>Accessible Information Standard work.</p>	Quarterly review and monitoring Priority area for further work around provision of information in different formats	
	2.2	People are informed and	Developing	Measured through the inpatient survey	Agree reporting for this measure.	April 2019

		supported to be as involved as they wish to be in decisions about their care			Identify any E&D related reporting.	
	2.3	People report positive experiences of the NHS	Developing	<p>Feedback strategy and monitored via QAC. Report available.</p> <p>Developing relationships with key partners such as Alzheimer's Society, Compass Carers, Taunton Deaf Club, Foxes learning Disability.</p> <p>"Reflections of Me" programme of work</p> <p>Friends and family feedback.</p> <p>Health watch feedback</p>	Further work carers feedback and making feedback methods accessible in different formats	
	2.4	People's complaints about services are handled respectfully and efficiently	Developing	<p>Complaints plan of work. Reported via QAC and external peer review audit.</p> <p>Questionnaire to all complainants seeking feedback. Monitoring of satisfaction of complaint handling (includes protected characteristics)</p> <p>CQC inspection report</p> <p>QAC report available</p> <p>CCG monitor complaints</p>	On-going work around the protected characteristics.	
3. A representative & supported workforce	3.1	Fair NHS recruitment and selections processes lead to a more representative workforce at all levels	Developing	All current recruitment processes are screened to ensure protected characteristics not identified. Recruitment policy updated 2017 to ensure fair processes.	Review of training offered to recruiters on bias and discrimination required	April 2019
	3.2	The NHS is committed to equal pay for work of equal value and expects employers to use equal pay audits to help fulfil	Achieved	<p>National terms and conditions in place for job evaluation</p> <p>Agenda for change processes in place</p> <p>Gender pay reporting complete for 2017/2018</p>	Utilise improvement methodology to approach to gender pay reporting moving forward	March 2019

	their legal obligations					
3.3	Training and development opportunities are taken up and positively evaluated by staff	Developing	Evidence is completed at the end of each training session by attendees CQC report from 2016 identified equality and diversity training delivered and recognised by colleagues. 2016 and 2017 NHS staff survey results.	More detailed and relevant information relating to E&D could be obtained through running focus groups and adding relevant E&D questions onto the evaluation feedback we give out Review whether new learning management system can offer any additional support for evaluation of training.	2019/2020 financial year	
3.4	When at work, staff are free from abuse, harassment, bullying and violence from any source	Under developed	National staff survey 2016 & 2017 results	High Priority 2016 & 2017 survey findings evidence an improvement yet remain worse than desired BME Champion role introduced	Ongoing	
3.5	Flexible working options are available to all staff consistent with the needs of the service and the way people lead their lives	Developing	Flexible working policy in place for staff, this is used significantly across the hospital. e-rostering & safe staffing KPI's 2016 staff survey demonstrates 53% white positive response to flexible working and 61% positive response for BME. 2017 findings show 53% white positive and 67% BME positive about flexible working patterns. 51% men and 55% women. 49% disabled and 55% non-disabled.	Review of flexible working policy to be carried out as part of alliance	Sept 2019	
3.6	Staff report positive experiences of their membership of the workforce	Developing	National Staff Survey results Pulse check information Friends and Family information.	Lack of information broken down into protected characteristics		

					Overseas nursing forum being developed	
4. Inclusive Leadership	4.1	Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations.	Developing	<p>The members of the Board receive papers and analyse their impact on matters pertaining to equality and diversity on a regular basis.</p> <p>The equality and diversity portfolio is the ultimate responsibility of the director of people for colleagues. Outside of the Trust, members of the Board participate in county-wide groups where service re-designs are discussed in the context of the needs of all members of the community. In addition, there are numerous community events where the Trust is present in the form of members of the Board and staff, ensuring that the services provided by the Trust are welcoming to all sections of the community and responsive to the needs of all members of it.</p> <p>The Board are Involved in outcome based commissioning discussions, patient pathways and outcomes.</p>	<p>Board development event on how they met the duty of due regard</p> <p>Reverse mentoring to be implemented</p>	December 2018
	4.2	Papers that come before Board and their major committees identify equality-related impacts including risks, and say how these risks are to be managed	Developing	There is now a review of equality impact into the review of papers in advance of circulation for Committees	Review effectiveness of this new process	
	4.3	Middle managers and their line managers support their staff to work in culturally competent ways within a work environment free from discrimination	Developing	<p>Values and leadership behaviours and lead rolled out.</p> <p>Pulse check and staff survey</p>	Roll out of combined values and behaviours and compass for leadership.	Ongoing