**Equality Delivery System Evidence and Grading Table**

1. **Patients (outcomes 1 and 2) Graded through community engagement event**

2. **Employees (outcomes 3) Graded through staff engagement event**

3. **Leadership (outcome 4) Graded through staff engagement event**

| EDS Areas | EDS Outcome | Evidence Gathering - Synopsis | Community and Workforce Rating **Excelling – Purple** **Achieving – Green** **Developing – Amber** **Undeveloped – Red** | Key Comment | Progress Action |
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| Better Health outcomes for all | 1.1 Services are commissioned, designed and procured to meet the health needs of local communities, | The Trust engages with a wide range of community and sector partnership organisations to address needs of local communities. We have contributed to raising awareness of hospital services with Gypsy Romani communities, Learning Disability | Amber | A general sense that the Trust has evidence of local community engagement: 1) Need further | E&D and Membership managers to produce list of community engagement activities |

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| | promote well-being, and reduce health inequalities | Groups (leading to the recruitment of a specialist LD nurse), Faith organisations and commitments to work with the LGBT community. Community exhibitions are being held in our out patients department focussing on raising awareness of staff and the public about protected characteristic groups. | | evidence on all protected characteristics<br>2) Patient monitoring does not reflect all protected characteristics<br>3) E&D training for feeding buddies on delivering culturally sensitive service<br>4) Concerns around information about availability of accessible parking<br>5) Information relating to outcomes of meetings with community groups to be shared | Patient monitoring to address wider characteristics<br><br>Train feeding Buddies<br>Discuss at disability network how to flag up if disabled parking spaces are available – signs only give information for all parking spaces<br><br>Prepare update for next meeting about outcomes from community engagement activities |

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| | 1.2 Individual patients' health needs are assessed, and resulting services provided, in appropriate and effective ways | The Trust provides the following interpreting and translation services to (a) assist patients understand their care and treatment (b) helps patients understand why they are being asked for their consent & (c) supports patients with making an informed choice.<br><br>Essex Interpreting Services are used to ensure that face to face Interpreters are provided for patients who do not speak English).<br><br>Language Line Interpreting Services are provided via telephone interpreters for patients who do not speak English.<br><br>Deaf Blind UK Interpreters & Guides are provided for patients who are deaf and blind).<br><br>Royal Association for Deaf People interpreters are provided for patients who need interpreters).<br><br>Language Line (an agreement is in place to ensure that leaflets and | Amber | A general sense that the Trust needs to improve its gathering of data relating to protected characteristics (as highlighted in 1.1)<br><br>1) E&D monitoring of usage of translation services is needed<br>2) Use patient tracker to target protected groups | Further engagement required with 9 protected characteristics.<br><br>Utilise Patient Tracker (or similar) to get feedback from relevant groups |

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| | | information is translated into the native language of the patient when required). | | | |
| | 1.3 Changes across services for individual patients are discussed with them, and transitions are made smoothly | See response to 1.2<br><br>In addition to the above - when required the Trust has used interpreters during local resolution meetings (complaints meetings) to ensure that the complainant(s) understand what has been said. A joint working protocol has also been established with other local public sector providers in relation to the NHS complaints process. | Amber | As above 1.2 | As above 1.2 |
| | 1.4 The safety of patients is prioritised and assured | There has been no complaints received relating to the safety of care of patients. The Trust also holds a number of meetings to monitors the E&D agenda (such as LD Committee, Disability Network, LGBT Network, Dignity Action and Respect Group) which monitors the patient and carer experience. | Amber | A general sense that the Trust needs to gather quality data and promote complains procedure to wider groups:<br>1) Report on E&D data relating to complaints<br>2) Promote complains procedure to protected | Prepare report of E&D complaints<br><br>Through engagement activities provide information about complaint procedure |

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| | | | | characteristic groups<br>3) 1.4b in the CQC ratings is a priority action that must be addressed – a fundamental issue | |
| | 1.5 Public health, vaccination and screening programmes reach and benefit all local communities and groups | The Trust delivers breast screening and sexual health screening services. Engagement with the Breast Unit has achieved a change in communities to all clients in elation to language and disability access requirements. The sexual health clinic is working with the LGBT Network to deliver an event for this target group to identify potential areas of focus for the Trust. We have developed a strong link with the Terrance Higgins Trust to help influence inclusive client services.<br><br>All new parents of new born babies are offered hearing screening in line with national NHS expectations.<br><br>A full mapping of screening services is underway to identify the range of services we offer. This will enable the Trust to prioritise equality outcomes | Amber | A general sense that the Trust needs to gather quality evidence:<br><br>1) Gather evidence to improve to green rating<br>2) Full mapping of screen services and draw relevance to E&D groups | Map all screening across Trust<br><br>Make recommendations for areas of potential improvement with E&D groups |

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| | | for this area. | | | |
| | 2.1 Patients, carers and communities can readily access services, and should not be denied access on unreasonable grounds | The Trust is currently drafting a Policy on Interpreting and Translation which supports the Trust in ensuring that patients are provided with the appropriate information.<br><br>The data provided by the Information Department also shows that patients from seldom heard communities are accessing services at the hospital contributing to a high use of interpreting services. | Green | A general sense that the Trust needs to gather quality data:<br><br>1) Community meetings to address any concerns<br>2) E&D monitoring of A&E patients with support from ambulance service | Community engagement to include monitoring of this standard<br><br><br><br>Liaise with the ambulance service about levels of attendance at A&E for protected characteristic groups |
| Improved patient access experience | 2.2 Patients are informed and supported so that they can understand their diagnoses, consent to their treatments, and choose their places of treatment | See response given to 1.2<br><br>The Trust is currently drafting a Policy for the Treatment of Oversees Patients that will include providing services to asylum seekers and refugees. | Green | A general sense that the Trust achieves in this areas, a few areas of improve were highlighted:<br>1) Height of check in screens for wheelchair users<br>2) Dignity of patients is compromised | Verify the height of the check-in screens to ensure they are DDA compliant<br><br>Identify measures to ensure privacy and dignity for patients in outpatients |

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| | 2.3 Patients and carers report positive experiences of the NHS, where they are listened to and respected and their privacy and dignity is prioritised | In addition to our own patient surveys (quarterly surveys sent to discharged patients and the real time patient experience tracker) and CQC national surveys the Trust meets with a number of groups in the community. For example, meetings have been established with the local Muslim community whereby guidance for dealing with Muslim deaths will be signed off (March 2012). The Trust has lead on this and worked in partnership with the local PCT, Southend Council (Registration Service) as well as the Coroners Office. The meetings have also focused on delivering training for staff (raising awareness of Muslim patients needs) as well as the provision of food for patients as well as staff and delivery of spiritual care. | Green | A general sense that the Trust achieves in this area, a few issues were raised:

1) Using patient tracker to consult with patients about Dignity
2) The availability of hoists in outpatients | Patient survey/patient tracker to include call button question and privacy/dignity question

Identify availability of hoists in outpatients and ascertain this is flagged on PAS. |
| | 2.4 Patients' and carers' complaints about services, and subsequent claims for | As stated earlier (interpreters are used when required to assist with bringing quick resolution to a complaint (verbal or written).

There have been 5 written complaints | Green | A general sense that the Trust needs to gather quality data:

See 1.4 | See 1.4 |

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| | redress, should be handled respectfully and efficiently | concerning Equality and diversity this Financial year (out of a total of 581 to date). Identified improvements from these complaints include:<br>1) Copies of feeding regimes to be sent home with the patient<br>2) Review of ethnicity questionnaire<br>3) Improvement of patient experience by sharing with staff<br>4) Improvement of patient calling system in a specific department.<br><br>There was also one PALS contact specifically relating to E&D however, this was a call of concern as that family of a mental health patient needed the contact details of another organisation. | | | |
| Empowered engaged, and well supported staff | 3.1 Recruitment and selection processes are fair, inclusive and transparent so that the workforce becomes as diverse as it can be within all | The Trust recruitment and selection policy sets out a non-discriminatory approach to this process embraces the principles of the equal opportunities in employment policy and dignity and respect policy. The Trust has no claims of discrimination at the point of recruitment. At an equality meeting of a cross section of staff there was a recognition of the | Amber | A general sense that the Trust has areas of improvement with recruitment:<br>1) Training of recruitment panels on non-discriminatory practices | Identify recruitment training programme and integrating non discrimination principles.<br><br>Draft communication |

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| | occupations and grades | need to improve the training of recruiters to ensure the organisation recruits to best equality standards<br><br>Our staff survey, 2010 shows 60% of staff who responded stated the Trust act fairly with regard to career progression/promotion regardless off protected stands.<br><br>Our equal opportunities staff monitoring reports currently provides data on staff grading for gender and future reports will aim to include this information for other protected characteristics<br><br>The Trust has a strong partnership with the local Jobcentre Plus resulting in increased access to employment through their respective employment and work experience programmes. | | 2)Communication to all staff about recruitment legal standards<br>3) Some managers are still receiving EO monitoring forms. | plan for all staff about E&D recruitment standards. |
| | 3.2 Levels of pay and related terms and conditions are fairly determined for all posts, with staff doing equal work and work rated | The Trusts Job Evaluation Policy sets out the process for determining the grade and therefore pay of all staff (except medical staff).<br><br>The pay and grading of staff is determined by their conditions of service. Medical staff, (doctors) and | Amber | A general sense that the Trust need to improve on staff performance management:<br><br>1) Disparity in | Review training programme and identity modules that address performance management. Recommend changes |

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| | as of equal value being entitled to equal pay | other staff on agenda for change have there pay grade determined using nationally agreed arrangements. The Trust uses the agenda for change job evaluation scheme which has been equality proofed nationally for staff on both local terms and agenda for change.<br><br>At an equality meeting of a cross section of staff there was recognition of the need to improve day-to-day management to ensure that all staff within the same pay grade consistently perform their duties at the required technical and behavioural level.<br><br>Our staff survey, 2010, states 29% respondents were satisfied or very satisfied with their level of pay this compared with 31% in 2009, this may reflect the impact of current economic climate on public sector pay. | | how people are managed within bands<br>2) Training on performance management | accordingly. |
| | 3.3 Through support, training, personal development and performance appraisal, staff | 54% of staff who completed the staff survey stated they are satisfied or very satisfied with support from their manager. This highlights a decline of 11.5% from the previous year. | Amber | A general sense that the Trust needs to improve training interventions:<br>1) Training | Identify how training is monitored and advise on potential changes to monitoring |

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| | are confident and competent to do their work, so that services are commissioned or provided appropriately | Arising from the 2010 staff survey focus groups were held to review the results and identify actions to improve employee experience. This has resulted in a staff panel (Have your say group) to monitor implementation of a resulting action plan and to hold the executive team to account for implementation. 56% of staff who completed the staff survey stated that if they were a patient they would be happy with the standard of care provided. | | should be monitored to measure improvements | processes |
| | 3.4 Staff are free from abuse, harassment, bullying, violence from both patients and their relatives and colleagues, with redress being open and fair to all | The Trusts equal opportunities and dignity and respect policy sets outs the Trust expectations for acceptable behaviours and informal and inform process to address issues that may arise for staff. Our policy and procedure for the management of violence and aggression set out processes to respond to violent and abusive behaviour from patients and visitors. 5% of staff who completed the staff survey stated they had personally experienced physical violence at work from the public, including patients. The Trust is one of the best 20% acute Trust in England. | Amber | A general sense that the Trust needs to raise awareness on dignity and respect issues: 1) The Trust would benefit from increasing awareness of the RED and YELLOW card policy relating to patients 2) There is a need to raise awareness of the | Increase the awareness of RED and YELLOW cards policy and practice. Increase dignity and respect training for staff. Include dignity and respect module in management development programme. |

| | | The % of staff who have personally experienced harassment bullying or abuse form the public including patients was 12%. Comparatively we are above average for acute Trusts in England.<br><br>1% of staff who completed the staff survey stated that they experienced personal physical violence from other staff which compares favourably with other acute Trusts.<br><br>12% of staff who completed the staff survey stated they experienced harassment bullying and abuse from other staff; this places the Trust in the top 20% of acute Trusts<br><br>68% of staff who completed the staff survey stated that the Trust treats them fairly as an employee and with dignity.<br><br>The Trust has improved its diversity training participation by making it mandatory for all people managers to undertake half day leadership diversity training. All new recruits are informed of equality rights and responsibilities as part of our | | Dignity and Respect Staff policy | |

| | | corporate induction programme. | | | |
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| | 3.5 Flexible working options are made available to all staff, consistent with the needs of patients, and the way that people lead their lives | The Trust Flexible Working Policy is available to ALL staff going beyond legislative requirements.<br><br>43% of staff who completed the staff survey stated that the Trust is committed to helping staff balance their work and home life; this shows a superior position to the average for acute Trusts.<br><br>The Trust's Child and Family support team are available to provide advice and guidance to staff to help manage their work life balance. | Green | A general sense that the Trust 'achieves' in this area:<br>1) Applications for  Flexible working are open to ALL | No Actions |
| | 3.6 The workforce is supported to remain healthy, with a focus on addressing major health and lifestyle issues that affect individual staff and the wider population | The Trust's Occupational Health department deliver a portfolio of initiatives to promote staff and well being, raging from counselling services, complimentary therapies and fitness programmes.<br><br>The Trust has the following policies: Occupational Health Service, Mental Health and Employee Well Being.<br><br>Staff survey show that staff are were that they have access to occupational health services. | Amber | A general sense that the Trust provides good benefit schemes to staff:<br><br>1) Good level of provisions<br>2) Timing could be improved to enable night staff to access well being provisions<br>3) Better promotion of staff | Consider practicalities of offering services at evening times<br><br>Increase communication / promotion to all staff<br><br>Communicate with Managers to promote well being to staff |

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| | | 30% of staff who completed the staff survey stated that during the proceeding 12 months they had felt unwell as a result of work related stress; this compares averagely with acute Trusts. | | benefits across the Trust<br>4) Managers could improve encouragement of staff take-up of well being services | |
| | 4.1 Boards and senior leaders conduct and plan their business so that equality is advanced, and good relations fostered, within their organisations and beyond | The Trusts Diversity Committee is chaired by the director of HR. Previously, all senior executives and board members have undertaken leadership diversity training. Senior executives and board members have attended many community engagement activities in expression of their commitment. The executive team have made commitment as fully paid members of Changing Faces and Stonewall.<br><br>There is a commitment to train all business unit directors, the executive team and board members about their equality duty responsibilities including planning to integrate equality objectives in our annual plan. | Amber/Red | A general sense that the Trust has engaged with the community through E&D activities:<br><br>1) Concerns were raised about active leadership commitment, and integrating diversity within annual planning | Exec and Board to undertake grading exercise<br><br>Ensure E&D is integrated in Annual Plans<br><br>Training for Board and Exec Team mandatory<br><br>Training for BUDS<br><br>Performance management of leaders in delivering E&D |
| | 4.2 Middle managers and | As mentioned previously, the Trust expects all people managers to | Red | A general sense that the Trust | Review people managers |

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| | other line managers support and motivate their staff to work in culturally competent ways within a work environment free from discrimination | attend half-day leadership diversity training.\n\nAt an equality meeting of a cross section of staff there was recognition of the need to gather further evidence of potential discrimination across all protected characteristics. | | does not perform well in this areas.\n\n1) Concerns around management understanding of E&D and Dignity and Respect\n2) Managers not held to account for inappropriate behaviours, managers are not challenged – some of this links to unproductive 'clicks' within the organisation and people being protected\n3) Participation with E&D training needs to improve – mandatory e-learning for all staff, half a day training for people managers. | training participation – and promote training to all managers\n\nImplement e-learning programme for all staff\n\nPromote dignity and respect policy to all staff – through effective staff engagement |
| | 4.3 The | The Trust is in the process of | Red | The Trust is | Review |

| | organisation uses the "Competency Framework for Equality and Diversity Leadership" to recruit, develop and support strategic leaders to advance equality outcomes | reviewing this framework to assess compatibility with leadership E&D activities. | | reviewing its engagement with this framework | framework and advise board & exec team |
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