

Equality Delivery System 2012 - 2013

1. Better health outcomes for all							
The NHS should achieve improvements in patient health, public health and patient safety for all, based on comprehensive evidence of needs and results							
1.1 Services are commissioned, designed and procured to meet the health needs of local communities, promote well-being, and reduce health inequalities							
Data/information	Engagement	Action	RAG rating			Lead	Evidence
			Jan 2012				
a. Public Health data http://www.coventrypct.nhs.uk/Cms/Documents/c303d852-7dfa-4a9b-b255-3a267e43bb11.pdf	Patient and Public Involvement team engagement http://www.coventrypct.nhs.uk/GetInvolved/Consultations	Equality Impact Assessments are carried out on all strategies to identify the particular needs of minority groups	Developing			Helen Bunter	
b. Coventry has the tenth highest rate of teenage conceptions in the country http://www.coventrypct.nhs.uk/Cms/Documents/c303d852-7dfa-4a9b-b255-3a267e43bb11.pdf	Via "Respect Yourself" team http://www.warwickshire.gov.uk/web/corporate/pages.nsf/Links/3647BAC2CE003A588025736B0038D05D	Implementation of the city's teenage pregnancy reduction strategy. Appears to be having an impact as figures are beginning to slowly improve.	Developing			John Forde	
c. People (adults and children) from lower socio-economic groups are more likely to be overweight and obese than those from more affluent areas. http://www.coventrypct.nhs.uk/Cms/Documents/7de13d2e-bea2-4537-b893-12aa125b8d32.pdf	Via Coventry Health Improvement Programme and Weight Management Strategy Group http://www.coventrypct.nhs.uk/YourHealth/HealthyWeight	Opportunities for healthy eating and physical activity targeted at priority neighbourhoods in Coventry Targeting of Childhood, Weight Management Programmes in Warwickshire	Developing			John Forde John Linane	
d. There is evidence to suggest that lesbians, gay men and bisexual men and women (LGB) smoke at higher rates than heterosexual men and women http://www.coventrypct.nhs.uk/Cms/Documents/4f439bf0-4b43-4090-919a-eac6f0ce4872.pdf	Warwickshire LINK are carrying out work with the LGB community	Engagement with target groups to understand needs	Undeveloped			John Forde	
e. People with psychiatric disorders are more likely to be heavier smokers, more dependant smokers and have smoked for longer than the general population. http://www.coventrypct.nhs.uk/Cms/Documents/4f439bf0-4b43-4090-919a-eac6f0ce4872.pdf	Staff training being carried out at St Michaels to offer a 1-2-1 stop smoking advice to service users	Opportunities though "Every Contact Counts" approach which is being piloted. Coventry and Warwickshire Partnership Trust's activity on this should be managed via the CQR meetings CQUIN in Warwickshire 2011 – 2012. Discuss putting on Coventry CQUIN list for 2012 - 2013	Developing			Caron Williams Jacqueline Barnes	

f. Men born in South Asia are 50% more likely to have a heart attack or angina than men in the general population. Bangladeshis have the highest rates, followed by Pakistanis, then Indians and other South Asians. http://www.coventrypct.nhs.uk/CmsDocuments/59fb6879-92e7-4cf9-8ce9-a4bb54e2d5c8.pdf	Long term conditions forum	NHS Health Checks will be systematically delivered to the population aged 40-74yrs with invitations being available in a variety of languages. Service providers must be experienced in delivering to all local populations. Monitoring assurance process will be undertaken to assess delivery against demographics.	Developing			Caron Williams	
g. Elderly people, particularly in rural areas, are at increased risk of death during the winter months due to fuel poverty http://www.warwickshire.gov.uk/Web/corporate/wccweb.nsf/Links/561923165A0CDA6D802578BD003DE7BD/\$file/ReviewofWinterDeaths.pdf	Information available via virtual wards	The public health team of NHS Warwickshire, will be working together with Stratford District Council to address the issue	Developing			John Linane	
1.2 Individual patients' health needs are assessed, and resulting services provided, in appropriate and effective ways							
Data/information	Engagement	Action	RAG rating			Lead	Evidence
			Jan 2012				
a. The Anchor Centre provides services for homeless and vulnerably housed people Anchor Centre	Focus groups were held with service users.	Service user volunteers were part of the tendering interview process. Equality Impact Assessment results were part of the short listing and tendering process	Achieving			Helen Bunter	
b. Smoking during pregnancy increases the risk of infant mortality by an estimated 40%. Pregnant women who smoke are 25% more likely to suffer a miscarriage. (Department of Health 2007). http://www.coventrypct.nhs.uk/CmsDocuments/168b6cb0-a841-46b4-b1f6-fcf0d10f1147.pdf	Via Smoking Cessation group Via University Hospitals Coventry and Warwickshire Via Any Qualified Provider	Targeting of Service Delivery to North Warwickshire reflecting need. Pick up through "Every Contact Counts Approach" Via CQR process we should be monitoring University Hospitals Coventry and Warwickshire on their performance in this area. Need to assess the impact of AQP on smoking in pregnancy.	Developing			John Linane John Forde	
c. Equality Impact Assessment of Improving Access to Psychological Treatments service showed a greater need within the BME community (higher rates of depression among Indian and Pakistani women) but uptake has been lower than expected http://www.coventrypct.nhs.uk/CmsDocuments/418b85ce-9821-4ec5-bea0-7d6067d1652f.doc	Issue raised at stakeholder event http://www.coventry.nhs.uk/CmsDocuments/418b85ce-9821-4ec5-bea0-7d6067d1652f.doc	Engagement with target groups to understand needs. Monitor data available on uptake. Tag to Supporting Long Term Conditions using the Bolton dashboard (Coventry) and risk stratification (Warwickshire).	Undeveloped			Caron Williams	

Documents/48c3cd1f-bdb8-49d8-b385-3aa539c1447b.pdf							
1.3 Changes across services for individual patients are discussed with them, and transitions are made smoothly							
Data/information	Engagement	Action	RAG rating			Lead	Evidence
			Jan 2012				
a. Patients are entitled to copies of letters about their health which are sent from one health professional to another http://www.bma.org.uk/images/consultantscopyingletterstopatients_tcm41-190155.doc	Patients report that they are not always copied into correspondence about them by consultants	Work with IT and intelligence at University Hospitals Coventry and Warwickshire, GEORGE ELIOT HOSPITAL and SWFT and local authorities.	Developing			Caron Williams	
b. The aim of Choose and Book is to enable patients to choose which hospital or clinic they go to. They should also be able to choose the date and time of their appointment. http://www.chooseandbook.nhs.uk/patients/whatiscab	Coventry LINK report that some GPs are not operating the scheme in full.	All GPs in Coventry are signed up to the Referral Support Service. The GPs should give the patient a leaflet explaining this service. If the referral proceeds then choice will be offered at this point unless continuity of care or some other reason means that the choice offered is limited to their previous provider	Developing			Natalie Fuller	
c. The NHS is founded on the principles of equal access and equal treatment for all. This includes providing interpreters to people who do not speak English – including British Sign Language interpreters. National standards for ethnic group and related matters : Department of Health - Publications It also includes providing support for people with learning disabilities or other conditions which mean that they need additional support during appointments or hospital stays. http://www.understandingindividualneeds.com/page.php?identity=health_and_wellbeing	University Hospitals Coventry and Warwickshire reports that information regarding patients' needs for interpreting services or longer appointments or other reasonable accommodation for their needs is not always given in referral letters leading to patients being turned away or delays in treatment. Identified at stakeholder event http://www.coventry.nhs.uk/CMsDocuments/418b85ce-9821-4ec5-bea0-7d6067d1652f.doc	Work with Clinical Commissioning Groups and Local Medical Committees to alert GPs to the need to mention any special needs when referring patients to secondary care. The RSS leaflet asks patients to tell their GP of any special needs, including the need for interpreters.	Developing			Kerrie Woods	

1.4 The safety of patients is prioritised and assured. In particular, patients are free from abuse, harassment, bullying, violence from other patients and staff, with redress being open and fair to all							
Data/information	Engagement	Action	RAG rating			Lead	Evidence
			Jan 2012				
a. GP survey	Through Coventry and Warwickshire LINK	Analysis of available data	Developing			Kerrie Woods	
b. Hospital surveys and complaints	Work in partnership with Trusts	Analysis of available data	Developing			Jacqueline Barnes	
1.5 Public health, vaccination and screening programmes reach and benefit all local communities and groups							
Data/information	Engagement	Action	RAG rating			Lead	Evidence
			Jan 2012				
a. Low rates of screening for bowel cancer and cervical cancer correspond to high levels of patients from areas of deprivation in GP practices (99% confidence interval) http://www.coventry.nhs.uk/CmsDocuments/c303d852-7dfa-4a9b-b255-3a267e43bb11.pdf	Currently being undertaken by LINK Via Screening commissioner and working group	Work with practices with a higher % of patients from deprived wards to Improve their rates of screening Local campaign to raise awareness. Possible inclusion in 1° Care Advisory Group. ID GPs and review data	Undeveloped			Kerrie Woods	
b. A health equity audit carried out in 2008/2009 identified that women in the most deprived areas and Muslim women were least likely to take up cervical screening programmes http://www.coventry.nhs.uk/CmsDocuments/5373a7e1-18bb-40a2-97b3-ca45c1c8c97e.pdf	Currently being undertaken by LINK. A report will be available early 2012	Work with practices in most deprived wards and with the Muslim community to improve screening rates Local campaign to raise awareness of screening services	Undeveloped			Kerrie Woods	
c. There has been a recent outbreak of measles in the gypsy and traveller community in Warwickshire (Gypsy and traveller health meeting, autumn 2011)	Vaccinations are given by the practice nurse and gypsies and travellers report difficulties in registering with GPs Research currently being undertaken by Warwickshire LINK. A report will be available early 2012	Work with Local Medical Committees and Clinical Commissioning Group during 2012 to identify at least one practice in each area which is willing to register gypsy and traveller families. Patient Advice and Liaison Service team to work with Warwickshire County Council on outreach with the community	Undeveloped			Kerrie Woods Esther Peapall	

2. Improved patient access and experience							
The NHS should improve accessibility and information, and deliver the right services that are targeted, useful, useable and used in order to improve patient experience							
2.1 Patients, carers and communities can readily access services, and should not be denied access on unreasonable grounds							
Data/information	Engagement	Action	RAG rating			Lead	Evidence
			Jan 2012				
a. NHS Coventry's Commissioning policies are not currently available on the website	Enquiries through Patient Advice and Liaison Service regarding eg eligibility for gastric band surgery	Ensure that all policies related to how and why commissioning decisions are made are available on the website for the public to access	Undeveloped			Caron Williams	
b. NHS Warwickshire's Commissioning policies are currently available on the website A-Z of Clinical Policies and Procedures NHS Warwickshire			Achieving			Clive Compton	
c. Gypsies and travellers have worse health than any other ethnic group leading to a shorter life expectancy Health needs of Gypsies and Travellers	Gypsies and travellers in North Warwickshire report difficulties in registering with GP practices	Work with Gypsy and Traveller representatives, the Local Medical Committees and Clinical Commissioning Groups to ensure that all members of this population have ready access to primary care services	Developing			Kerrie Woods	
d. An options appraisal is currently underway regarding maternity and paediatric services being provided by the George Elliot Hospital.	PPI team is currently undertaking engagement with local patients and residents. Employee engagement will be undertaken as part of the process. http://www.coventrypct.nhs.uk/GetInvolved/Consultations/Maternity	EIAs of the impact of the options on the patients and the staff has been carried out and will inform the decision making process.	Developing			Helen Bunter	
e. In Coventry, violent and aggressive patients are treated within the Anchor Centre. There is no protocol in place for them to appeal the decision to remove them from general practice and no process for them to be reviewed to determine whether they can return to general practice. NHS Warwickshire do have a process.	Complaints have been registered by the Patient Advice and Liaison Service by patients who do not feel that they should still be on the V&A register	Develop an Arden wide policy that will uphold patients' right to a 'fair trial'	Developing			Kerrie Woods	
f. Patients are removed from GP lists with no right of appeal http://www.rcgp.org.uk/PDF/Corp_removal_of_patients_from_gp_lists1.pdf	Complaints have been registered by the Patient Advice and Liaison Service from patients	Work with the Local Medical Committees and Clinical Commissioning Groups to ensure that all practices have clear policies in place regarding the	Developing			Kerrie Woods	

		removal of patients from lists and their right to appeal Re-issue guidance. Bench mark removals Possible inclusion in 1° Care Advisory Group.					
2.2 Patients are informed and supported to be as involved as they wish to be in their diagnoses and decisions about their care, and to exercise choice about treatments and places of treatment							
Data/information	Engagement	Action	RAG rating			Lead	Evidence
			Jan 2012				
a. Carers should be part of discharge planning http://www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/@dh/@en/@ps/documents/digitalasset/dh_116675.pdf	Carers groups report that patient discharge from hospital does not always involve carers in decision making. http://static.carers.org/files/out-of-hospital-final-report-6-may-2010-5221.pdf	Work with acute trusts to ensure that carers are fully engaged. Survey carers to receive qualitative feedback	Developing				
2.3 Patients and carers report positive experiences of their treatment and care outcomes and of being listened to and respected and of how their privacy and dignity is prioritised							
Data/information	Engagement	Action	RAG rating			Lead	Evidence
			Jan 2012				
a. Family members often complain on behalf of others. We need to ensure that the patient themselves consents to the information being shared. The Complaints Policy is in place to cover this How to make a complaint NHS Coventry	With individual patients	Patient consent is always sought and complaints cases do not proceed without consent.	Achieving			Rebecca Blyth	
2.4 Patients' and carers' complaints about services, and subsequent claims for redress, should be handled respectfully and efficiently							
Data/information	Engagement	Action	RAG rating			Lead	Evidence
			Jan 2012				
a. A feedback form is sent to Coventry complainants at the end of the process asking them about their experience of the complaints process. A diversity monitoring form is included with this.	From July 2010 – March 2011, 44 forms were sent out to those who had complained about Provider Services. There was a 34% return rate (15 forms). Of these, 11 (73%) were happy with the process and the way their complaint was dealt with (although not always content with the outcome During the same period, 29 forms were sent to people who had complained about Commissioned Services. 10	Increase the response rate to at least 40% Maintain the % of positive responses to 90% Address any issues raised through internal processes	Achieving			Rebecca Blyth	

	were returned (34%) with 90% being happy with the way their complaint was processed						
b. NHS Warwickshire have not carried out a similar process		Evaluation forms together with diversity questionnaire to be sent out to Warwickshire complainants during 2012	Undeveloped			Rebecca Blyth	
3. Empowered, Engaged and Well-Supported Staff							
The NHS should Increase the diversity and quality of the working lives of the paid and non-paid workforce, supporting all staff to better respond to patients' and communities' needs							
3.1 Recruitment and selection processes are fair, inclusive and transparent so that the workforce becomes as diverse as it can be within all occupations and grades							
Data/information	Engagement	Action	RAG rating			Lead	Evidence
			Jan 2012				
a. Six months of figures for recruitment/short listing and appointment data for Coventry PCT (ie commissioning staff and Coventry Community Health Service) showed that some applicants were significantly less likely to be shortlisted than others.	Via Staff Engagement Forum	An audit of a year's worth of data will be undertaken during 2012 looking at all six protected characteristics collected by NHS Jobs	Developing			Helen Bunter	
3.2 Levels of pay and related terms and conditions are fairly determined for all posts, with staff doing equal work and work rated as of equal value being entitled to equal pay							
Data/information	Engagement	Action	RAG rating			Lead	Evidence
			Jan 2012				
a. The gender pay gap in NHS Coventry was at 15.72 % in 2010 and increased to 21% in 2011. Workforce Statistics NHS Coventry	Work is being undertaken via the Staff Engagement Forum	Run a focus group with female employees at band 7 and ask them about their aspirations Have a female director talk to staff about work life balance and how they have progressed in their career. Monitor leavers via a form and a follow up phone call from HR in addition to the exit interview with the manager. Monitor the processes being used in re-configuration to ensure that it is fair and that senior women are not being disadvantaged.	Undeveloped				
b. The gender pay gap in NHS Warwickshire was 17.8% in 2010 and decreased to -6.9% in 2011. Equality and Diversity NHS Warwickshire		Continue to monitor and report annually	Achieving			Helen Bunter	

3.3 Through support, training, personal development and performance appraisal, staff are confident and competent to do their work, so that services are commissioned or provided appropriately						
Data/information	Engagement	Action	RAG rating			Evidence
			Jan 2012			
a. The 2010 staff survey reported that although 77% of staff at NHS Coventry had received an annual appraisal, only 36 % of staff said that it had been meaningful. Men and disabled staff scored lower than women and non-disabled staff http://www.nhsstaffsurveys.com/NHSReports/NHS_staff_survey_2010_5MD_sum.pdf	Via Staff Engagement Forum	Managers will receive training on conducting Individual Performance Reviews. 65% of managers will have been trained in Individual Performance Review by April 2013. Outcome: The staff survey for 2012 to show an increase in the % of staff receiving an appraisal and the % of staff who describe that appraisal as meaningful, with a greater increase being shown in men and disabled staff's responses.	Undeveloped			
b. The 2010 staff survey reported that although 72% of staff at NHS Warwickshire had received an annual appraisal, only 35 % of staff said that it had been meaningful. Men and disabled staff scored lower than women and non-disabled staff http://www.nhsstaffsurveys.com/NHSReports/NHS_staff_survey_2010_5PM_sum.pdf	Via Staff Engagement Forum	Managers will receive training on conducting Individual Performance Reviews. 65% of managers will have been trained in Individual Performance Review by April 2013. Outcome: The staff survey for 2012 to show an increase in the % of staff receiving an appraisal and the % of staff who describe that appraisal as meaningful, with a greater increase being shown in men and disabled staff's responses.	Undeveloped			Carol Innes
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						
Data/information	Engagement		RAG rating			Evidence
			Jan 2012			
a. The 2010 staff survey for NHS Warwickshire reported that disabled staff were more than twice as likely to report work related stress, and bullying or harassment by other staff, than non-disabled staff http://www.nhsstaffsurveys.com/NHSReports/NHS_staff_survey_2010_5PM_sum.pdf	The staff stress survey carried out in 2011 showed that disabled staff were more likely to report bullying and higher rates of stress than other staff	The Head of Equality and Human Rights will invite disabled staff to confidential 1-2-1 meetings to discuss the issue with them. During Individual Performance Reviews staff will be asked if any accommodation needs to be made for any disability or condition that they have. The issues will be discussed via the Staff Engagement Group	Undeveloped			

b. The 2010 staff survey for NHS Coventry reported that disabled staff were more than twice as likely to report bullying or harassment by other staff than non-disabled staff http://www.nhsstaffsurveys.com/NHSReports/NHS_staff_survey_2010_5MD_sum.pdf	The staff stress survey carried out in 2011 showed that disabled staff were more likely to report bullying and higher rates of stress than other staff	The Head of Equality and Human Rights will invite disabled staff to confidential 1-2-1 meetings to discuss the issue with them. During Individual Performance Reviews staff will be asked if any accommodation needs to be made for any disability or condition that they have. The issues will be discussed via the Staff Engagement Group	Undeveloped			Helen Bunter Carol Innes	
c. Staff working in complaints, Patient Advice and Liaison Service and Individual Funding Request services are sometimes verbally abused by patients and can feel physically under threat during face to face meetings. A policy is in place to help staff to deal with vexatious patients. Staff have been given conflict resolution training. A risk assessment was carried out	Discussions have been held with staff involved	Re-do risk assessment. Revisit policy. Consider building in counselling support every 2 weeks by telephone for affected staff Recording of all telephone conversation received to these phone lines	Developing			Carol Innes	

3.5 Flexible working options are made available to all staff, consistent with the needs of the service, and the way that people lead their lives. (Flexible working may be a reasonable adjustment for disabled members of staff or carers.)

Data/information	Engagement	Action	RAG rating			Lead	Evidence
			Jan 2012				
a. The 2010 staff survey for NHS Coventry reported that 78% of staff used flexible working. This was worse than similar trusts http://www.nhsstaffsurveys.com/NHSReports/NHS_staff_survey_2010_5MD_sum.pdf	Via Staff Engagement Forum	During 2012, staff will be reminded of their right to request flexible working via information on the intranet and through an article in Evolution Magazine	Undeveloped				
b. The 2010 staff survey for NHS Warwickshire reported that 88% of staff used flexible working. This was better than similar trusts http://www.nhsstaffsurveys.com/NHSReports/NHS_staff_survey_2010_5PM_sum.pdf			Achieving			Carol Innes	

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							
Data/information	Engagement	Action	RAG rating			Lead	Evidence
			Jan 2012				
a. The Invest in You programme has been developed to increase the resilience of staff in the face of change	Evaluation of the programme shows that staff have received the programme very positively	Development of the programme	Achieving			Carol Innes	
b. A telephone support system – Employee Assistance Programme – is in place www.employeeassistance.org.uk	Feedback from staff who have used the service is very positive	Continue to provide.	Achieving			Carol Innes	
c. A contract is in place with the occupational health service to support staff via physiotherapy, workplace assessment, long term sickness and return to work, referral to counselling services	Through Staff Side and Joint Negotiating and Consultative Committee	Continue to provide.	Achieving			Carol Innes	
4 Inclusive leadership at all levels							
NHS organisations should ensure that equality is everyone's business, and everyone is expected to take an active part, supported by the work of specialist equality leaders and champions							
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							
Data/information	Engagement	Action	RAG rating			Lead	Evidence
			Jan 2012				
a. The Cluster Board wants to keep a focus on the health and treatment of patients in all their decisions	Patients and carers are engaged with to select volunteers.	A patient or carer tells their story at the beginning of every Board meeting	Developing			Fay Baillie	
b. The Cluster Board has requested that they are updated at every meeting regarding exceptions to this action plan	Discussions with senior directors	To be included as part of the Director of Nursing's Board report	Undeveloped			Helen Bunter	
c. At Board meetings, equality and human rights should be part of core business	Discussions with senior directors and previous Board training	In conjunction with the NHS National Leadership Council, senior members of the Board will be coached and given feedback to support them in this work	Developing			Fay Baillie	
d. Commissioning Support Service is a new organisation and is still developing		Raise at senior team meeting to add to personal development plans	Undeveloped			Caron Williams	
e. Transfer of commissioning responsibilities from PCTs to Clinical Commissioning Groups during 2011 – 2012 include public body duties under the Equality Act 2010 http://www.nhsemployers.org/SiteC	Training and support available to Clinical Commissioning Groups	To carry out an equality impact assessment of our Clinical Commissioning Group commissioning strategies	Undeveloped			Juliet Hancox	

ollectionDocuments/Implementing%20the%20Equality%20Act%202010%20-%20Interim%20guidance%2028.11.2011.pdf							
4.2 Middle managers and other line managers support and motivate their staff to work in culturally competent ways within a work environment free from discrimination							
Data/information	Engagement	Action	RAG rating			Lead	Evidence
			Jan 2012				
a. The 2010 staff survey reported that although approximately 70% of staff had received an annual appraisal, only half of these said that it had been meaningful. Men and disabled staff scored lower than women and non-disabled staff	Staff survey feedback	Training to be provided for managers to improve the content of annual appraisals. This will include how to support disabled staff by offering them the opportunity to discuss any issues that they may have.	Undeveloped			Carol Innes	
4.3 The organisation uses the "Competency Framework for Equality and Diversity Leadership" to recruit, develop and support strategic leaders to advance equality outcomes							
Data/information	Engagement	Action	RAG rating			Lead	Evidence
			Jan 2012				
a. Commissioning Support Service is a new organisation and is still developing	Via Joint Negotiating and Consultative Committee and Staff Side have a seat on the steering group	Raise at senior team meeting to add to personal development plans	Undeveloped			Caron Williams	
b. As part of their authorisation process, Clinical Commissioning Groups are required to evidence that they are able to comply with their public body duties under the Equality Act 2010 http://www.yorksandhumber.nhs.uk/document.php?o=7480	Training and support available to Clinical Commissioning Groups	To evidence use of the national competency framework for equality and diversity leadership in the development of our individual Clinical Commissioning Group boards	Undeveloped			Juliet Hancox	