



Arden and Greater East Midlands
Commissioning Support Unit

EQUALITY DELIVERY SYSTEM 2 (EDS2)

Evidence portfolio

Date of publication

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Introduction to the NHS Equality Delivery System (EDS2)

The Equality Delivery System (EDS2) framework was designed by the NHS to support NHS commissioners and providers to meet their duties under the Equality Act 2010. The EDS2 has four goals, supported by 18 outcomes as detailed in the table (1) below. NHS Arden and Greater East Midlands Commissioning Support Unit (AGEM) have used the EDS2 as a toolkit to meet the requirements (Public Sector Equality Duty) under the Equality Act 2010 and in discussion with local partners including local populations, to review and improve our performance for people with characteristics protected by the Equality Act 2010. Furthermore we have linked the EDS2 to Human Rights, table 2 lists the Articles.

From April 2015, EDS2 implementation by NHS organisations was made mandatory in the NHS standard contract. In addition, EDS2 implementation is explicitly cited within the Clinical Commissioning Group (CCG) Assurance Framework, and will continue to be a key requirement for the CCGs.

AGEM have committed to implementing the EDS2 systems as part of our continuing work with CCGs and other NHS organisations.

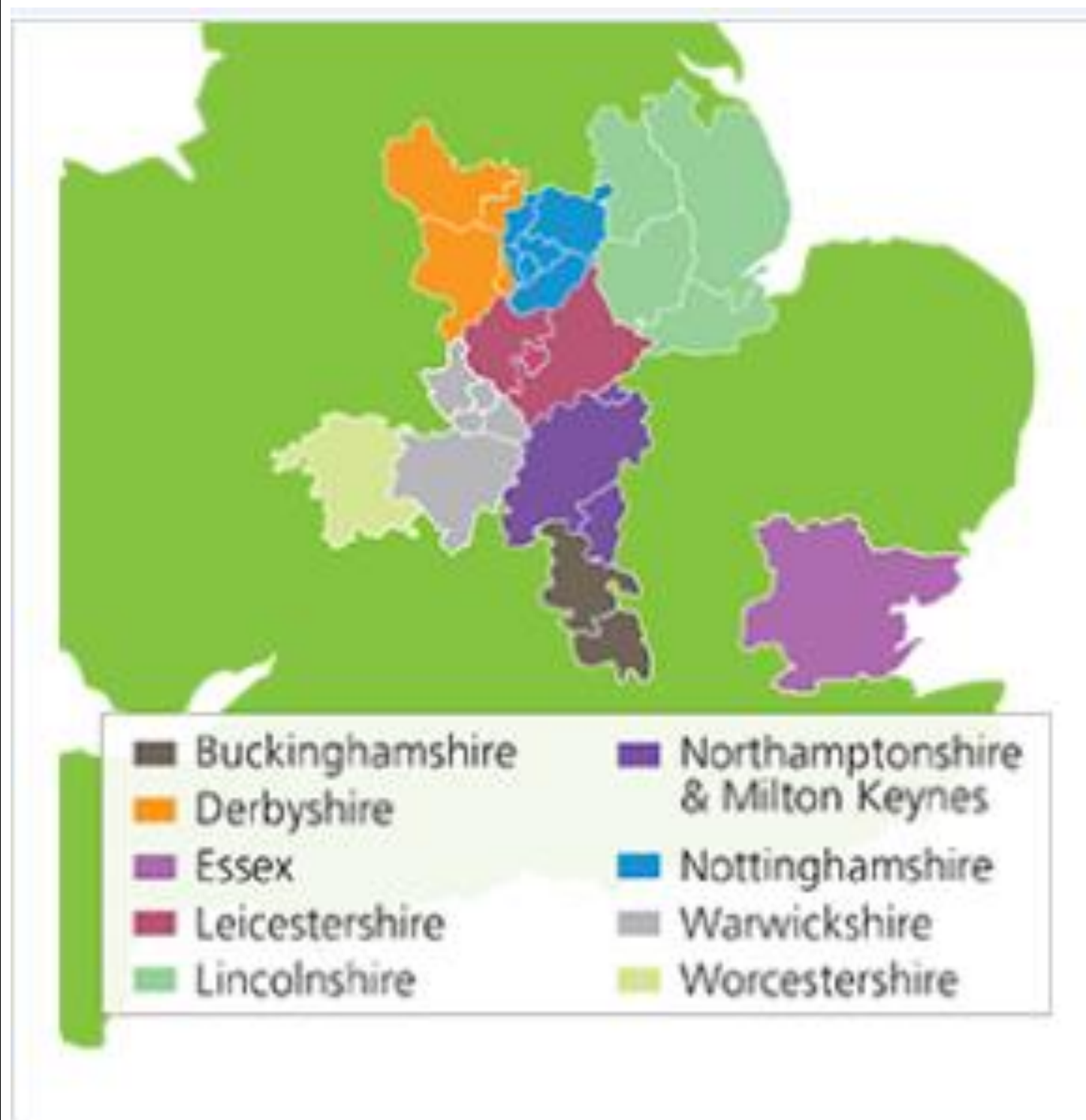
The Goals and Outcomes of EDS2

The goals and outcomes of <i>EDS2</i>		
Goal	Number	Description of outcome
Better health outcomes	1.1	Services are commissioned, procured, designed and delivered to meet the health needs of local communities
	1.2	Individual people's health needs are assessed and met in appropriate and effective ways
	1.3	Transitions from one service to another, for people on care pathways, are made smoothly with everyone well-informed
	1.4	When people use NHS services their safety is prioritised and they are free from mistakes, mistreatment and abuse
	1.5	Screening, vaccination and other health promotion services reach and benefit all local communities
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
	2.2	People are informed and supported to be as involved as they wish to be in decisions about their care
	2.3	People report positive experiences of the NHS
	2.4	People's complaints about services are handled respectfully and efficiently
The goals and outcomes of <i>EDS2 (continued)</i>		
A representative and supported workforce	3.1	Fair NHS recruitment and selection processes lead to a more representative workforce at all levels
	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
	3.3	Training and development opportunities are taken up and positively evaluated by all staff
	3.4	When at work, staff are free from abuse, harassment, bullying and violence from any source
	3.5	Flexible working options are available to all staff consistent with the needs of the service and the way people lead their lives
	3.6	Staff report positive experiences of their membership of the workforce
Inclusive leadership	4.1	Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisations
	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
	4.3	Middle managers and other line managers support their staff to work in culturally competent ways within a work environment free from discrimination

Articles of the European Convention of Human Rights

- Article 2 | Right to life
- Article 3 | Anti-torture and inhumane treatment
- Article 4 | Anti-slavery
- Article 5 | Right to liberty and security of the person
- Article 6 | Right to a fair trial
- Article 7 | Anti-retrospective conviction
- Article 8 | Right to private and family life
- Article 9 | Right to freedom of thought, conscience and religion
- Article 10 | Right to freedom of expression
- Article 11 | Right to freedom of assembly and association
- Article 12 | Right to marriage
- Article 13 | Right to an effective remedy
- Article 14 | Anti-discrimination
- Article 1 of the First Protocol: Protection of property
- Article 2 of the First Protocol: Right to education
- Article 3 of the First Protocol: Right to free elections

Map of NHS Arden & Greater East Midlands Commissioning Support Unit region



As one of the largest commissioning support organisations in the UK, AGEM acts as a valued and trusted partner for commissioners and providers that want to tackle the challenges we face in building something we all want to aspire to: integrated, seamless, high quality services that meet the needs of patients, families and communities.

AGEM supports a wider customer base across the Greater East Midlands, with the Equality, Inclusion and Human Rights Team support focusing on CCGs within the immediate geography of the East Midlands.

Overview of Arden & Greater East Midlands CSU population information

AGEM area population compared against that of England as a whole, by protected characteristic (based on 2011 Census estimates or later ONS projections as available).

The AGEM area population was based on its office locations (Coventry and Warwickshire, Derbyshire, Essex, Leicestershire and Rutland, Lincolnshire, Milton Keynes, Nottinghamshire, Northamptonshire, and Worcestershire).

Age band (quinary)	England		Arden & GEM area	
	n	%	n	%
0 to 4 years old	3430957	6.317%	503460	6.055%
5 to 9 years old	3272365	6.025%	493154	5.931%
10 to 14 years old	2973055	5.474%	457445	5.501%
15 to 19 years old	3230954	5.948%	504475	6.067%
20 to 24 years old	3606417	6.640%	545469	6.560%
25 to 29 years old	3718382	6.846%	507890	6.108%
30 to 34 years old	3707209	6.825%	507023	6.098%
35 to 39 years old	3396004	6.252%	488303	5.873%
40 to 44 years old	3707404	6.826%	568504	6.837%
45 to 49 years old	3918363	7.214%	616886	7.419%
50 to 54 years old	3717288	6.844%	586314	7.051%
55 to 59 years old	3186581	5.867%	505981	6.085%
60 to 64 years old	2913931	5.365%	476412	5.730%
65 to 69 years old	2975461	5.478%	494723	5.950%
70 to 74 years old	2187412	4.027%	360805	4.339%
75 to 79 years old	1784958	3.286%	286185	3.442%
80 to 84 years old	1314361	2.420%	209020	2.514%
85 to 89 years old	805111	1.482%	128269	1.543%
90 years old and over	470405	0.866%	74658	0.898%
Total known	54316618	100.000%	8314976	100.000%

2014 mid-year population estimates (ONS); all usual residents

Disability	England		Arden & GEM CSU area	
	n	%	n	%
Day-to-day activities limited a lot	4405394	8.310%	660673	8.147%
Day-to-day activities limited a little	4947192	9.332%	775869	9.567%
Day-to-day activities not limited	43659870	82.358%	6672974	82.286%
Total known	53012456	100.000%	8109516	100.000%

2011 UK Census; all usual residents

Gender	England		Arden & GEM CSU area	
	n	%	n	%
Females	27543422	50.709%	4217989	50.728%
Males	26773196	49.291%	4096987	49.272%
Total known	54316618	100.000%	8314976	100.000%

2014 mid-year population estimates (ONS); all usual residents

Marital status	England		Arden & GEM CSU area	
	n	%	n	%
Divorced or formerly in a same-sex civil partnership which is now legally dissolved	3857137	8.972%	607492	9.216%
In a registered same-sex civil partnership	100288	0.233%	11873	0.180%
Married	20029369	46.591%	3246170	49.245%
Separated (but still legally married or still legally in a same-sex civil partnership)	1141196	2.655%	168066	2.550%
Single (never married or never registered a same-sex civil partnership)	14889928	34.636%	2087617	31.670%
Widowed or surviving partner from a same-sex civil partnership	2971702	6.913%	470616	7.139%
Total known	42989620	100.000%	6591834	100.000%

2011 UK Census; all usual residents aged 16 years old and over

Religion or belief	England		Arden & GEM CSU area	
	n	%	n	%
No religion	13114232	26.650%	2175397	28.806%
Buddhist	238626	0.485%	24886	0.330%
Christian	31479876	63.973%	4868455	64.468%
Hindu	806199	1.638%	129176	1.711%
Jewish	261282	0.531%	13924	0.184%
Muslim	2660116	5.406%	228820	3.030%
Sikh	420196	0.854%	79320	1.050%
Other religion	227825	0.463%	31812	0.421%
Total known	49208352	100.000%	7551790	100.000%
Religion not stated [†]	3804104	7.176%	557726	6.877%
<i>Grand total</i>	<i>53012456</i>		<i>8109516</i>	

2011 UK Census; all usual residents; [†] percentage calculated using the grand total as the base

Ethnicity		England		Arden & GEM CSU area	
		n	%	n	%
White	English/Welsh/Scottish/Northern Irish/British	42279236	79.753%	6946467	85.658%
	Gypsy or Irish Traveller	54895	0.104%	8075	0.100%
	Irish	517001	0.975%	63717	0.786%
	Other White	2430010	4.584%	259492	3.200%
Asian/Asian British	Bangladeshi	436514	0.823%	23634	0.291%
	Chinese	379503	0.716%	43719	0.539%
	Indian	1395702	2.633%	248678	3.066%
	Pakistani	1112282	2.098%	93711	1.156%
	Other Asian	819402	1.546%	75027	0.925%
Black/African/Caribbean/Black British	African	977741	1.844%	86777	1.070%
	Caribbean	591016	1.115%	47493	0.586%
	Other Black	277857	0.524%	18123	0.223%
Mixed/multiple ethnic group	White and Asian	332708	0.628%	41261	0.509%
	White and Black African	161550	0.305%	16543	0.204%
	White and Black Caribbean	415616	0.784%	64068	0.790%
	Other Mixed	283005	0.534%	29056	0.358%
Other ethnic group	Arab	220985	0.417%	15929	0.196%
	Any other ethnic group	327433	0.618%	27746	0.342%
Total known		53012456	100.000%	8109516	100.000%

2011 UK Census; all usual residents

Main language		England		Arden & GEM CSU area	
		n	%	n	%
European language	English (English or Welsh if in Wales)	46936780	92.023%	7373799	94.343%
	French	145026	0.284%	9926	0.127%
	Portuguese	131002	0.257%	10014	0.128%
	Spanish	118554	0.232%	7044	0.090%
	Polish	529173	1.037%	82492	1.055%
	Any other European language (EU)	654403	1.283%	68670	0.879%
	Other European language (non EU)	233971	0.459%	17992	0.230%
South Asian language	Bengali (with Sylheti and Chatgaya)	216196	0.424%	11476	0.147%
	Gujarati	212217	0.416%	51727	0.662%
	Panjabi	271580	0.532%	35925	0.460%
	Tamil	99773	0.196%	8300	0.106%
	Urdu	266330	0.522%	23134	0.296%
	Any other South Asian language	215072	0.422%	22656	0.290%
East Asian language	Chinese	199378	0.391%	25422	0.325%
	Any other East Asian language	174635	0.342%	16236	0.208%
Other language	West/Central Asian language	181424	0.356%	13636	0.174%
	African language	240572	0.472%	22615	0.289%
	Arabic	152490	0.299%	12047	0.154%
	Other language	27034	0.053%	2856	0.037%
Total known		51005610	100.000%	7815967	100.000%

2011 UK Census; all usual residents aged 3 years old and over

NHS Arden & Greater East Midlands Commissioning Support Unit's Approach to Equality

AGEM is committed to designing and implementing policies, procedures and provides services that meet the diverse needs of our local population and workforce, ensuring that none are placed at a disadvantage over others. AGEM takes into account current UK legislative requirements and best practice. These include the Equality Act 2010, Human Rights Act 1998, Gender Recognition Act 2004, the NHS Constitution and guidelines on best practice from the Equality and Human Rights Commission, NHS England and the Department of Health.

AGEM commits to promote Equality, Inclusion and Human Rights (EIHR) so that the AGEM activities ensure no-one receives less favorable treatment due to their personal circumstances. This includes, but is not limited to, the protected characteristics of their age, disability, sex, gender reassignment, sexual orientation, marriage and civil partnership, race, religion or belief, pregnancy and maternity status.

AGEM commits to ensure that when making decisions, appropriate and proportionate consideration is given to; gender identity, socio-economic status, immigration status and the principles of Human Rights in the Human Rights Act 1998.

In carrying out its functions, AGEM is committed to having due regard to the Public Sector Equality Duty of the Equality Act 2010. This applies to all the activities for which the AGEM is responsible, whether internal, on behalf of customers or where services are commissioned on its behalf, including policy development and review.

At the heart of this commitment is the requirement placed on **ALL** staff to ensure that robust and proportionate Equality Analysis and Due Regard is taken in relation to any decision which will have an effect on people and so can be effectively demonstrated.

This is a legal requirement, enshrined in:

- The Equality Act 2010 (Public Sector Equality Duty, s149)
- The Human Rights Act 1998
- Health and Social Care Act 2012 (Section 14)
- The NHS Constitution.

In order to meet these requirements, AGEM ensures that before making any relevant decisions it has proportionately considered the following:

1. Who will be affected by the decision?
 - a. Current / prospective / future service users
 - b. Families, carers and dependents
 - c. Staff
2. Is the information available comprehensive or will more research be needed to gain a complete understanding of the affects?
3. What will the impact(s) be?
 - a. Will it be positive or negative?
 - b. Are some groups affected differently than others?
 - c. Is action required to ensure an equitable outcome?
4. If there is a negative impact, can this be mitigated?
 - a. If so, what action is needed and is this proportionate?
 - b. If not, why is this not possible

Historically, many NHS and public organisations have used an Equality Impact Assessment form (EIA) to facilitate this process. With the introduction of the Equality Act 2010, an EIA form (while providing structure) proved inadequate to demonstrate the level of evidence required to meet the new legislative requirements in having Due Regard. It is important to remember that this is about far more than the need to assess policies. A range of decisions can have an impact and if this is not identified in advance an inequality may be produced or sustained and AGEM placed at risk of challenge from the local community being served.

AGEM annually publishes on its website a summary of its activities in relation to Equality, Inclusion and Human Rights against the NHS Equality Delivery System (EDS2).

AGEM works to ensure that in designing and procuring services, AGEM (and the CCGs it supports) ensures that services are delivered inclusively and in line with the Public Sector Equality Duty. A key goal in doing so is to ensure that equality of access is provided to all patients and that services deliver equality of outcome. With the move towards Co-Commissioning of GP Practice services with NHS England AGEM, by supporting CCGs, has a further role in using the procurement process to enhance services and ensure equality of access / outcome for all patients.

Each aspect of the procurement activity includes embedded EIHR considerations (where proportionate and relevant) and includes comprehensive EIHR-related tender questions in both Pre-Qualifying Questionnaire (PQQ) and Invite to Tender (ITT) stages.

AGEM has strongly committed to embedding EIHR across the organisation to ensure that the experience of staff is a positive one and that they feel supported and engaged. This approach is summarised through the AGEM Equality Commitment.

AGEM has a team of specialist HR professionals who cover all aspects of HR activity including key areas where embedded EIHR considerations are necessary for AGEM to demonstrate the value its workforce provides. Through collaboration with the AGEM EIHR specialist colleagues AGEM is successfully maintaining its status as a Two Ticks for Disability employer.

For example, all HR policy development and the recruitment, selection and appointment processes are fully assessed for their EIHR considerations to ensure a proactive approach is taken.

AGEM is also supporting the following initiatives to further ensure an inclusive working environment:

- Stonewall
- Two Ticks
- Mindful Employer
- Time to Change

Workforce reporting

As AGEM employs 1130 members of staff, in line with the duty, it has produced detailed staff profiles by protected characteristics.

The separate report published alongside this portfolio provides the profiles of the AGEM workforce. The profiles have been statistically analysed to further understand whether any under or over representation across the relevant protected characteristics is significant. In order to protect the identity of individual employees, all of the results have been suppressed if the number is 10 or less.

This report shows a number of under and over representations (Summary of Findings, p.10 & p.14) within the overall workforce profile, when looking at the recruitment and selection process and when compared to the local population.

AGEM is committed to ensuring the working environment is inclusive and appropriate support is provided to any member of the organisation that may require it.

All of AGEM internal workforce policies have been developed in line with current legislative requirements, including the Equality Act 2010. These policies cover the recruitment, selection and appointment process as well as all aspects of working for AGEM.

As part of the AGEM continuing work, the above report will support the organisation in developing its own Equality Objectives.

Equality Delivery System 2 (EDS2) Evidence Portfolio



Human Resources			
AGEM Human Resources and Organisational Development team offer a range of tools and expertise to ensure that you are recruiting the right people, retaining them and getting the most out of your teams throughout the employee lifecycle.			
Relevant EDS2 Goals/Outcome	How equalities is built into what each service line delivers	How this is demonstrated in delivery	Key Examples
3.1 3.3 3.4 3.5 3.6	<p>The HR team take a number of steps to ensure that their work complies with Equality legislation and best practice, including:</p> <ul style="list-style-type: none"> • Compliance with safer staffing best practice (recruitment). • Regular reporting of E&D (protected characteristics) on recruitment and annually organisationally. • Training for staff on various policies that may impact on E&D. • Follow processes and policies if concerns are raised internally or externally to the organisation about inequality of any type (i.e. HR will support investigations and the grievance and disciplinary processes). • Provide training for staff as required on specific areas and ensure compliance with statutory and mandatory training. 	<p>The Internal and External HR BP teams all attend regular updates on regulation and legal compliance; we also review policies and processes as required and work with E&D colleagues to ensure a consistent and compliant approach.</p> <p>The HR and EIHR functions collaborating to develop specific interventions for areas of the organisation in need of specific support.</p>	<ul style="list-style-type: none"> • The HR team led on the EIA of the service transformation program (AGEM merger). • All AGEM policies are agreed nationally by the Business Development Unit and then rolled out across AGEM. The consultation process prior to agreement is both local and national but the EIA process is done as part of the national process and not required to be repeated locally. • Delivery of training that includes equality – especially around whistle blowing and complaints. <p>We are unable to provide physical evidence to publish due to our work being a sellable product to customers and therefore we cannot put this information in the public domain.</p>

Organisational Development

Through our tailored business partnering model, customers can be assured that they will receive the best advice and support and that all policies, procedures, resourcing and employee relations are implemented to the highest standard. The service we offer Includes performance appraisal review systems, training, team building, mentoring and coaching programmes which all help optimise performance.

Relevant EDS2 Goals/Outcome	How equalities is built into what each service line delivers	How this is demonstrated in delivery	Key Examples
3.3 3.6 4.3	<p>As part of the recruitment process for posts within the team we follow HR guidance and policies in terms of equality and inclusion. Equal opportunities are given to staff who indicate they have a disability on their recruitment forms.</p> <p>We are aware of and know where to find relevant policies including the Equality and Diversity Policy, Maternity, Paternity & Adoption Policies and the Training & Development Policy.</p>	<p>Training and support documents for ASPIRE are provided in a printable document for those who may not be able to use IT equipment. Paper forms of the appraisal process could also be produced should the need arise. As part of the new starter induction process we ensure that all starters are provided with access to their statutory and mandatory training which includes a module on Equality and Diversity.</p> <p>We monitor the completion of this training, reporting and communication across the organisation to ensure staff understand the importance of carrying out this training as part of their role. As part of the health and wellbeing programme we work in close collaboration with the Equality and Inclusion team on projects such as Time for Change and Mental Health Awareness Week. We ensure that our teams are supporting each other and are linked up in terms of the messages we want to send to staff. Occupational Health is also on offer to all staff to help with any issues they may have; either work or personal related. When carrying out events, we ensure that staff are asked and are able to provide details of any accessibility or special requirements they have so that they can be provided. Where possible, paper copies of presentations are also provided, either at or after events, so that staff are able to access them either electronically or in paper form.</p> <p>The Academy, our learning management system contains various e-learning, face to face and video topics. The Academy is accessible over any internet connection, so allows for those people who are not always working at one of our sites, to be connected. We have considered scenarios where some people may require the information in an alternative format and have ensured this is possible as follows:</p> <ul style="list-style-type: none"> • The e-learning is compatible with screen reading software to ensure people with visual difficulties can still access it. Any images contained within the e-learning can be replaced with appropriate descriptions so that the learner receives all the relevant information. • The e-learning does not contain any sections of audio so would not result in any restrictions for learners with hearing difficulties. 	<p>Examples of our work include;</p> <ul style="list-style-type: none"> • Posters to advertise training & development opportunities. • Our Mental Health Awareness Week email campaign which consisted of 5 emails. • A printable version of the ASPIRE user guide and competency framework. • The statutory and mandatory training matrix, which includes the Equality & Diversity module. • The induction presentation and post documents in electronic and paper form. <p>We are unable to provide physical evidence to publish due to our work being a sellable product to customers and therefore we cannot put this information in the public domain.</p>

		<ul style="list-style-type: none"> • The Pearl of Wisdom are animated audio videos and scripts for what is being said, this could be provided for learners who have hearing difficulties. • Face to face courses are available at our own sites and we always ask attendees for any access and special requirements that would be needed for them to attend so that these can be catered for. <p>Stress awareness and management courses have been provided for our staff. We considered the most appropriate way to run these and determined two different courses; one for managers and one for all staff in order to ensure appropriate conversations could be had with peers. We considered where previous courses had been run at our sites and where the staff survey and verbal feedback had indicated courses would be beneficial in order to select the most appropriate sites to hold them at. We tried to ensure that both types of courses were held at a spread of sites so that people didn't have to travel too far if one wasn't being held at their own site. Prior to the training session we always ask attendees for any access and special requirements that would be needed for them to attend so that these can be catered for.</p>	
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Complaints

We manage an end-to-end process from the receipt of complaint, through to managing the investigation, preparing you fully for your response to the customer.

We pride ourselves on being able to communicate sensitively and effectively with a wide variety of groups, modifying our approach and language accordingly to ensure people feel listened to and their complaint acted upon.

Relevant EDS2 Goals/Outcome	How equalities is built into what each service line delivers	How this is demonstrated in delivery	Key Examples
2.3 2.4	<p>The complaints service that is provided for the CCG customers is governed by statutory legislation; "The Local Authority Social Services and National Health Service Complaints (England) Regulations 2009.</p> <p>All staff have annual mandatory equality and diversity training. Two members of the team undertook Level 2 Equality and Diversity training.</p>	<p>All information including leaflets, letters, reports, forms can be provided in various formats, such as braille, alternative fonts, Easy Read and translation services can be provided.</p> <p>Complaint investigation outcomes can also be provided to complainants at a face to face meeting if this is what they wish.</p> <p>Each contact received is reviewed and assessed on an individual basis.</p> <p>Management plans are agreed with complainants on a case by case basis.</p>	<p>In addition to E&D training staff in the department receive, all staff working within the Complaints and Customer Care Team are Band 4 or above; one of the core competencies as identified within ASPIRE is Customer Focus "I am professional and responsive to the needs of internal and external customers" which would include responding to individual needs. Staff are encouraged to save some supporting evidence regarding allowing for individual needs and requirements.</p> <p>We have managed a complaint on behalf of one of our CCG customers whereby the complainant (who is in a same sex relationship) is challenging the CCG's policy for IVF funding. They feel that the policy is discriminating a same sex couple by putting in place a financial barrier to them receiving funding; they feel that they are being asked to undertake part of the process in a clinical environment and don't believe the same would be asked of a heterosexual couple.</p>

	<p>Some staff have also undertaken Customer Service training that incorporates how to provide an appropriate, equal service to all patients and their representatives.</p> <p>We work within a structure that operates standard practices for dealing with all complaints and correspondence received; this can be by letter, email, telephone or face to face meeting.</p> <p>The complaints regulations and AGEM standard operating procedures allow for:</p> <ul style="list-style-type: none"> • Complaints to be made by a representative, with the appropriate patient consent. • All complaints are acknowledged within three working days. • All acknowledgement letters include contact details for the advocacy service, who can provide support to patients or their representatives, according to individual needs or requirements. • An equality monitoring form is sent out with the acknowledgement letter (copy attached). • An individual management plan is agreed with each complainant; this includes a timeframe for responding, allowing for an appropriate and full investigation to be undertaken. 	<p>Staff are experienced in assessing and understanding individual requirements and tailor individual management plans according to the overall needs of the individual.</p> <p>Working with some of the CCG Customers in the further development of CCG complaints information, that will be available in various formats.</p>	<p>The Initial investigation has necessitated the need for a careful review of the policy and has also confirmed that the request to undertake part of the process in a clinical environment is the same, irrespective of whether the person requesting funding is in a same sex or heterosexual relationship.</p> <p>Appendix 1</p>
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Engagement, Communications and Marketing

We support local, regional and national consultation programmes, and have a proven track record for building open, honest and transparent two-way conversation between stakeholders, patients, citizens and communities, including hard to reach populations.

This brings our customers a wide ranging and balanced insight and evidence to support clinical commissioning decisions and activities around wider service redesign, transformation and reconfiguration.

Relevant EDS2 Goals/Outcome	How equalities is built into what each service line delivers	How this is demonstrated in delivery	Key Examples
<p>1.1 1.2 2.2 2.3 3.6 Indirectly (4.1)</p>	<p>A thorough understanding of the Health and Social Care Act (2012) and Equality Act (2010) allowing robust application of the Cabinet Office Code of Conduct and Government's four tests, ensuring a patient centered, clinically-led approach to engagement, consultation and communication of commissioned services.</p> <p>Through our governance process for the development of policies and procedures, including continual assessment of equalities through the completion of EDS2. We are also working towards 100% completion of equalities training for all staff in the service line. In addition, the ECM team takes account of the equalities legislation whenever programmes of engagement and consultation are developed, and ensures that all these activities take account of the views of people from the nine protected characteristics. Recent examples include a public consultation about urgent care in Warwickshire North, and a public consultation about substance misuse on behalf of the Leicester, Leicestershire and Rutland local authorities. Our communications also take account of different accessibility needs.</p>	<ul style="list-style-type: none"> • By advising CCGs / customers on appropriate activity to meet the equality duty legislation and helping them to demonstrate this. • By advising CCGs on appropriate engagement and consultation activity that meets the equality duty and helping them to demonstrate this - for example through completion of EDS2, equality objectives etc., through ensuring that all engagement and consultation activity takes account of the nine protected characteristics and actively engages with relevant groups and through ensuring that communications are developed taking into account accessibility needs. • By developing communications and engagement materials that take account of diversity in order to ensure that all have appropriate access and involvement. • By providing a standard 'equalities monitoring' set of questions for use in all engagement and consultation. • Whilst developing marketing activities, by taking into account the groups with the nine protected characteristics during scoping of target groups, and by developing appropriate materials to meet target groups' communication needs. • We work to the Draft GEM 'Development and Management of Procedural Documentation in the Greater East Midlands (GEM) Commissioning Support Unit (CSU) which includes due regard – a check list for policies and procedures has been introduced to the Clinical Quality and Safety Committee when considering P&P this included due regard. • We broadcast staff briefings and upload the film as well as provide slides in PowerPoint which can be manipulated for people with sight issues. • By subscribing to Microsoft 365 we provide a degree of access features <ul style="list-style-type: none"> - Text enlarger - Background colour change - Text-to-speech via ROKtalk (3rd part license required). • In addition it gives us access to a disabled customer's service desk. 	<ul style="list-style-type: none"> • An example of an 'easy read' document used in our public consultation on urgent care services in Warwickshire. • Planning for the communications about changes to crisis mental health services in South Warwickshire, taking into account different communication needs of different groups. • Our 'Stay Well' campaign in West Leicestershire CCG, which involved working with a diversity of groups e.g. visiting a Hindu temple, visiting the Alzheimer's society, developing specific materials and interventions to meet key groups' needs. • Our standardised monitoring data questions. • The accessibility of our websites. • A timetable of groups visited in our public consultation on urgent care in Warwickshire North. • Christmas Healthy Elf Advent Calendar 2015! – YouTube. <p>Appendices 2 - 5</p>

Equality, Inclusion and Human Rights

We provide the advice and support you need to implement equality and support inclusive cultures both out in communities and across all your teams in line with legislation. Our service line also includes support with decision making and proportionate equality analysis – ensuring due regard to your legal duties, staff training and community engagement events.

Relevant EDS2 Goals/ Outcome	How equalities is built into what each service line delivers	How this is demonstrated in delivery	Key Examples
1.1 1.2 1.3 2.1 2.2 2.4 3.1 3.4 4.3	<p>The EIHR service line provides advice, guidance and assurance of legal compliance to CCG customers and AGEM service lines.</p> <p>With a team of specialists, project managers and coordinators, the service's key tasks are advising on the impact of decisions and proposals around Equality Inclusion and Human Rights and the organisation's legal duties.</p> <p>In addition the service supports CCG customers in demonstrating the evidence for their Equality Objectives and compliance with the Public Sector Equality Duty, supported through the EDS2 framework.</p>	<p>The EIHR team has worked with CCG customers and AGEM service lines to embed Equality Analysis and Due Regard into policies and decisions.</p> <p>In addition the teams have supported CCG customers to publish their equality objectives and EDS2 evidence as part of demonstrating compliance with the PSED. Examples demonstrating this can be seen via the following links:</p> <p>Lincolnshire CCG and an Arden CCG.</p>	<ul style="list-style-type: none"> Key examples of evidence include the training delivered to GP practice managers. The Equality Analysis and Due Regard guidance to support the PMO process. The revised PQQ and ITT questions which support a robust procurement process which takes fully into account Equality, Inclusion and Human Rights consideration. HR policy guidance. <p>Appendices 6 - 10</p>

Clinical Services (Continuing Health Care)

Our team of experts manage everything from the initial screening of referrals through to the delivery of care. Our nurse assessor's lead all elements of the assessment process, engaging with patients, families, carers and health and social care professionals as required.

Relevant EDS2 Goals/ Outcome	How equalities is built into what each service line delivers	How this is demonstrated in delivery	Key Examples
1.1 1.2 1.4 2.1 2.2 3.1 3.4 3.5 4.3	<p>By robust application of the National Framework for NHS Continuing Healthcare and NHS Funded Nursing Care (2012), ensuring a patient centered/personalised care approach to assessment, placement and review of patients for NHS funding.</p> <p>Compliance to the Mental Capacity Act (2005) with regard to capacity, consent and DOLs. This is evidenced through our consent policy and practice when carrying out a CHC assessment.</p> <p>By our Nursing Strategy – this is based on the chief nursing officers 6 'C's which is patient centered and embraces the respect and dignity agenda and through our governance process for the development of policies and procedures, which includes equality considerations.</p>	<ul style="list-style-type: none"> By recognising AGEM policy and procedures – All clinical services Policies and Procedures are subject to due regard before a new policy/procedure is developed. We work to the Draft GEM 'Development and Management of Procedural Documentation in the Greater East Midlands (GEM) Commissioning Support Unit (CSU) which includes due regard – a check list for policies and procedures has been introduced to the Clinical Quality and Safety Committee when considering P&P this included due regard. Mandatory Training of our staff. This includes equality and diversity training as part of our Mandatory training – all staff are expected to be up to date with training and complacence is monitored by heads of service. 	<ul style="list-style-type: none"> Our CHC patient information leaflet (in draft). Policy – our clinical records management policy (including equality impact assessment). Our work concerning standardizing the way CHC assessments are delivered to ensure equality of access and assessment for CHC patients across the AGEM area. Our 6 monthly CHC audit which includes monitoring of consent and equality information *Our advice to CCG's and AGEM CHC Staff following the Cheshire West ruling regarding DOLS. 6Cs information & diagram. <p>Appendices 11 - 15</p>

Operational Excellence

The Operational Excellence department has a focus on delivering process improvement across service lines within the AGEM based on current AGEM activity.

Relevant EDS2 Goals/Outcome	How equalities is built into what each service line delivers	How this is demonstrated in delivery	Key Examples
1.1 3.3	<p>We currently deliver process improvements to departments, project management support, training and development and ISO accreditation, preparation and training.</p> <p>To ensure equality runs through all the work we do our processes are built to take into consideration people's needs and situations. We are very flexible with how we provide services ensuring locations, audience and requirements are what they need to be.</p>	<p>A large amount of our work is facilitating change within staff members and because of this we are always mindful of how different people can react to different situations and how these can be managed. We design work packages with the customers in mind therefore each piece of work is tailored to meet any needs the customer may have.</p> <p>For example a recent piece of work conducted with our internal SARs team was located within their workspace allowing for minimal disruption, the training was delivered at a time which suited them and allowed all of the team to participate and engage. Although there were some decisions which had to be made and potential changes to current working practices all team members were fully supported.</p>	<p>The team works across a large geographical patch with many teams, to ensure a good work life balance the team members are supported to work flexible hours wherever possible due to the large amount of travel that can be required. Different staff members prefer different modes of transport (car and public transport) all of which are supported by the management.</p> <p>When carrying out internal audits of process we travel to staff members at their base at a mutually convenient time to ensure that everyone who needs to have input in the process is able to do so.</p> <p>Appendix 16</p>

Knowledge Management

The Knowledge Management Team are dedicated to empower you to be able to work with your colleagues and collaborate effectively for the benefit of AGEM and its customers.

Sharing the right knowledge, with the right person at the right time for a positive effect. Making sure the person is able to leverage this information for maximum benefit.

Relevant EDS2 Goals/Outcome	How equalities is built into what each service line delivers	How this is demonstrated in delivery	Key Examples
1.1	<p>The Knowledge Management Team work to ensure the right information is delivered at the right time to the right person and they are in the position to be able to use it for positive effect. We support all users and are focused on developing and supporting the individual to ensure they are able to deliver at optimal effectiveness.</p> <p>Our systems are designed to be used from any location and support flexible working. As a team we pride ourselves on promoting positive methods of working.</p> <p>Within the team examples of this include flexible working hours and remote working to support individual circumstances for all members of the team.</p>	<p>With system development and support we include diverse stakeholders and both listen and implement suggestions. We are on a continual development cycle to improve what we do and are committed to excellence in delivery. We consider who could be using the information and how as well as where and when they will be accessing it. On top of this we consider what skills they will require to be able to make the most of this information. Therefore we include as many people as possible and promote equality.</p> <p>This is demonstrated by the user guides and training materials that we produce as well as the quick reference guides that we have created. On top of this we have produced video interactions showing users how to do key tasks.</p>	<p>The AGEM Cloud (Office 365) system demonstrates equality as it enables all users to participate, collaborate and to fulfil their potential. The design of the system allows users to connect from internet enabled devices that meet the requirements. This means that users are able to work on a device that best suits their requirements and situation and still collaborate real time with their colleagues and customers.</p> <p>We have standardized our operating procedures and processes to make them transparent robust and repeatable. This means that the customers (both internal and external) receive a consistent reliable service.</p> <p>There is no evidence available to support this as the work the knowledge management team are responsible for undertaking is about developing processes rather than products. We work closely with Operational Excellence team to achieve working to the ISO improvement process.</p>

Corporate Assurance			
Service Line Description			
Relevant EDS2 Goals/ Outcome	How equalities is built into what each service line delivers	How this is demonstrated in delivery	Key Examples
1.1 Indirectly (1.2) 1.4	<p>The Corporate Assurance team has some diversity in terms of age, gender and ethnicity, which it highly values, and sees each member of the team as vital to its success. In managing this diversity no-one is negatively judged or treated on the basis of any protected characteristic, and everyone is respected for what they can bring to the team in terms of skills, experience and talent.</p> <p>Without a good blend of people from varied backgrounds, experience and cultures, the Corporate Assurance team would not be in a position to understand the diverse needs of the AGEM and its customers, and would in the long run fail as a service line.</p> <p>The Corporate Assurance service line is responsible for developing the AGEM policy on the production of policies and procedural documents. In this policy it is strongly stated that all such documents must embed within them any equality issues that the policy or procedure raises and addresses. This embedding is a move away from the production of an impact assessment form, which in the past has placed equality considerations as a separate activity that can take place outside of the policy development itself.</p> <p>By changing the way equality issues are considered it is intended to make sure equality becomes a core part of the AGEM culture. The service line is also responsible for delivering Health and Safety services to customers, primarily CCGs. Where the service develops policy and procedure for a customer then the equality embedding referred to above is an opportunity for the service to assist customers with meeting their own PSED responsibilities.</p> <p>It is also part of the Health and Safety service to ensure that when customer Health and Safety procedures are drawn up, for example fire evacuation procedures, the needs of</p>	<p>The Corporate Assurance service line demonstrates delivery by ensuring all policies and procedures it produces comply with the draft policy framework's requirements, including those prepared on behalf of customers. It also demonstrates compliance by ensuring any papers it writes for the Governing Body and other committees include information on equality and diversity where it is relevant to the subject matter.</p> <p>The Senior Corporate Assurance Manager earlier this year completed a level 2 certificate in Equality, Inclusion and Human Rights.</p>	<p>Tangible outputs are the policy framework, the Corporate Governance Framework, and Health and Safety policies developed for customers.</p> <p>The Health and Safety advisors working to CCGs on behalf of AGEM have also been involved in a number of workplace assessments aimed at assisting staff with physical difficulties and the reasonable adjustments required of employers.</p> <p>We are unable to provide physical evidence to publish due to our policies being revised and currently in draft format.</p>

	<p>people with particular requirements, such as wheelchair users, are taken into account. Personal Emergency Evacuation Plans (PEEPs) are prepared for all staff who are identified as requiring a plan.</p> <p>The service line also delivers a Business Continuity service to customers, and again equality issues are central to the drawing up and delivery of business continuity plans and protocols. In a situation where continuity is challenged it is important to ensure that service continues to be delivered according to customer and consumer needs and is not diminished by promoting the needs of one group over those of another.</p>		
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Information Governance

We bring the benefits of scale, which means our compliance service is affordable and cost effective. Failure to comply is not an option and so our in-depth service ensures our customers stay fully compliant with all information governance standards and laws, including the Data Protection Act (1998) and Freedom of Information Act (2000).

Relevant EDS2 Goals/Outcome	How equalities is built into what each service line delivers	How this is demonstrated in delivery	Key Examples
1.1 1.4	The team follows the HR processes which are available on the intranet. The Team pays due regard to the organisation's Equality and Diversity policy. The team considers reasonable adjustments on staff seating plans where employees have a physical disability.	The SARs Service (Subject Access Requests), which is a public facing service, can receive requests either via post or e-mail; advice can also be sought over the telephone. Where an applicant is struggling to submit a request formally the team will support applicants to complete an application form. Where required emails and letters can be sent in large text. The team actively contacts the Equality and Diversity team for advice on specific issues, such as ensuring that due regard has been paid in the Information Governance policy templates the team supplies to its CCG customers and ensuring that Information Governance Training packages meet equality and diversity requirements. Setting up meetings where patient representatives will be present and ensuring they can access the venue and any other needs are met to ensure they can fully participate in the meeting.	<p>Staff have different ways of learning and different levels of IT skills and to ensure that everyone has equitable access to Information Governance Training the team has developed a staff workbook and face to face training to run alongside e-learning. The IG Team has recently contacted the Equality and Diversity team for support in ensuring that due regard has been paid to Equality and Diversity in the Email Policy template the team supplies to CCG customers. The Team developed an Information Governance Training presentation to be delivered to GP practice staff at GP practice sites. The Equality and Diversity Team were contacted for support in ensuring Equality & Diversity had been correctly addressed.</p> <p>There is no evidence available to support this as the work the IG team are responsible for undertaking is about developing processes rather than products.</p>

Estates and Facilities Management / Business Continuity			
Within the Estates, Facilities and Health & Safety function we aim to provide a proactive approach to Health and Safety management to assist in the creation and maintenance of an environment which is safe for all and should also prevent and/or reduce the likelihood of loss to individuals and to AGEM.			
Relevant EDS2 Goals/Outcome	How equalities is built into what each service line delivers	How this is demonstrated in delivery	Key Examples
1.4	<p>The Business Continuity Policy has an Equality Statement included. (note statement is in draft format)</p> <p>Estates and Facilities</p> <p>The Health & Safety Policy has an Equality Statement included. This policy reflects our commitment to create an environment and culture where Health and Safety at work is a prime consideration in all areas of activity. The successful implementation of this policy requires co-operation from <u>all</u> members of staff.</p>	<p>As a service line we carry out business continuity awareness training and conduct scenario exercises to support organisations with embedding business continuity with their employees.</p> <p>Estates & Facilities</p> <p>Supporting our buildings and in-line with Health & Safety we request support from all employees (who are interested) to support the organisation with additional responsibilities such as Fire Co-ordinators and Health & Safety Representatives.</p> <p>Health & Safety</p> <p>Organisational responsibilities for ALL staff are documented in the Health and Safety policy.</p> <p>Where required the organisation will support employees with a Personal Emergency Evacuation Plan (PEEP) which supports anyone who is unable to securely evacuate the business premises unaided during an emergency.</p>	<p>As a service we have a Business Continuity Working Group which consists of employees across the organisation.</p> <p>Estates & Facilities</p> <p>When planning an office decant/move a consultation takes place with all staff via HR (if needed) to give opportunities for issues to be raised by individuals, we would then work with that Individual to ensure that any issues were addressed and actioned appropriately. These very principles were used on the movement of Continuing Healthcare team moving out of The Shrubberies, Chesterfield to a new office Venture House, Chesterfield.</p> <p>Health & Safety</p> <p>Within Health & Safety we have the Corporate Governance Committee which comprises of appropriate Directors and Managers. This group will be responsible for the overall corporate risk management of AGEM, including Health and Safety. This committee reports to the Governing Body.</p> <p>In addition, the Health & Safety and Environmental Group reports to the Corporate Governance Committee and will make recommendations based on the ongoing management of the AGEM Health and Safety Management System.</p> <p>Appendices 17 – 22</p>

Transformation Services

Our team has a proven track record of designing, developing, testing and delivering cost effective service transformation projects that have been built upon a shared commitment to, and aspirations for, patients and users. We draw on the expertise of our procurement, contracting and business intelligence teams to ensure a joined-up approach that delivers real and lasting impact.

Relevant EDS2 Goals/Outcome	How equalities is built into what each service line delivers	How this is demonstrated in delivery	Key Examples
1.1 1.2 1.3 1.4 2.1 2.2 2.4 4.3	All our recruitment follows NHS guidance so staff are shortlisted on their abilities listed in their application form. There are always 2 staff interviewing and any choices are made initially independently then through discussion around answers to questions which is all written during the interview.	<p>Our service line delivers products which treat all patients as equals and makes no inequality judgements on any information received.</p> <p>The Transformation team are able to use data analysis to highlight areas of practice which require service redesign.</p> <p>a) Utilisation review used standardised software to review patient notes in a healthcare setting and determined their continuing need for previous and ongoing care based on clinical need. The selection of patients audited were at all times randomly selected and all were treated equally.</p> <p>b) Deep dive uses a range of national data which is benchmarked with “like” CCGs and can therefore compare areas of high spend which may require service redesign.</p> <p>Due regard and consideration to equality is considered when delivering these products at all times.</p>	<p>An Utilisation Review of Critical Care services was carried out across a number of hospital sites across a region. All patients were assessed equally during the review. Our bank staff were used flexibly to fit in with their needs and our need to deliver a service.</p> <p>Appendix 23</p>

Strategic Programmes

The NHS Strategic Projects Team (SPT) was established in 2009, under the leadership of Dr Stephen Dunn and Andrew MacPherson, with the aim of delivering strategic change in the former East of England and later Midlands and East NHS region, supporting NHS organisations and working in partnership with Providers and Commissioners, both regionally and nationally in the interest of delivering sustainable, high quality healthcare and service excellence for the NHS. The team is a self-funded standalone entity, and has been hosted by AGEM since April 2013.

Relevant EDS2 Goals/Outcome	How equalities is built into what each service line delivers	How this is demonstrated in delivery	Key Examples
1.1 1.2 1.3 1.4 2.1 2.2 4.3	<p>The SPT consists of a dedicated group of specialists from within the NHS and independent sectors. We design and deliver a range of innovative solutions and programmes that aim to make a difference in the health sector in a number of specialist areas including strategic change, merger, divestment, acquisition, franchise and patient experience.</p> <p>Many of our projects are of a commercial nature, and therefore whilst SPT specialists are bound to be mindful of and take into due regard the Public Sector Equality duty to eliminate discrimination, harassment and victimisation, we often do not get to a level where we are able to influence the</p>	<p>Noted below are examples of some of the projects SPT has undertaken. Specific examples of ways in which our approach takes into account equality requirements are listed thereafter.</p> <p>Examples of projects delivered by the SPT:</p> <p>Supported achievement of an integrated older people's health and adult community care programme for NHS Cambridgeshire and Peterborough CCGs with a five year contract value of circa £800m.</p> <p>Roll out and implementation of the national Friends and Family Test (FFT) across the Midlands and East for the Regional Director of Nursing, across all pathways, according to the guidance and timetables set by NHS England.</p>	<p>Core function: Supporting the CCG in undertaking procurement through to contract award phases. Procurement of Integrated pathway of Older People's Health Services, with an interface of services provided by other statutory agencies, i.e. local authority.</p> <p>Procurement undertaken on behalf of the CCG comprising 8 LCGs that jointly cover a population of 863,570. Due regard to equality and access to services across resulting pathway undertaken as part of options appraisal. Preparation for procurement entailed assessing accessibility of proposed pathway with key stakeholders.</p> <p>Core function: Delivery of PMO to oversee change projects.</p> <p>Supported the hospital in undertaking its Strategic Change Programme initiated to secure the future of acute hospital services that are clinically and financially sustainable and deliver a high quality patient experience. Specific projects supported on behalf of the Trust were in the areas of Patient Flow, Theatre Efficiency and X2 IM&T projects with an</p>

	<p>advancement of equality of opportune and foster good relations. That being said, our specialists are always mindful of this duty in project delivery, indeed the commercial nature of some of the projects undertaken requires rigorous parity of approach and complete transparency to demonstrate fairness and equality and avoid the risk of challenge.</p>	<p>Supported Mid Essex Hospital Services NHS Trust through providing PMO support in the delivery of reconfiguration on specific pathways and Trust wide change requirements.</p> <p>Delivered the NHS England National Referral to treatment (RTT) Data Validation Programme overseeing the regional delivery on behalf of North England CSU, yielding significant improvements for Trusts involved.</p> <p>Developed Outcomes Frameworks for Integrated care programmes on behalf of NHS North and South Warwickshire CCGs with an anticipated 5 year contract value of circa £400m.</p> <p>Supporting West Suffolk Hospital NHS Foundation Trust in its bid to tender for Suffolk-wide Community Services, with additional support provided post service mobilisation in relation to quality developments across the Trust and by way of facilitating the delivery of cost and savings improvement plans for Suffolk Community Services.</p>	<p>overall aim of improving patient safety and experience and improvements in productivity.</p> <p>(Difficult to confirm explicit due regard to equality perspective, however by improving theatre utilisation and reducing cancellation of planned operations and improving effective flow of emergency patients and indirect benefit will be better access to services and improvements in regards to equality of access).</p> <p>Core function: Development of Outcomes Framework with the CCGs and thereafter further work to undertake procurement for delivery of services in accordance with resultant frameworks.</p> <p>A set of overarching critical success factors were already developed by the CCGs through extensive discussion with stakeholders (including patients, carers, clinicians and providers) and review of national and international best practice. Using this information, SPT then developed the outcomes framework with the CCG through a number of co-design workshops, further review of data from local, national and international information and evidence, feedback from local Outcomes Reference Groups, feedback from a variety of key stakeholders (including CCG, Local Authority, Primary Care, Public Health, Patients and Clinicians). The process included specifically taking due regard of access needs and ensuring the needs of potentially excluded or hard to reach patients were factored in.</p> <p>Core function: Delivery of PMO to the Trust which involved supporting them through procurement for delivery of Suffolk-wide Community Services.</p> <p>(As with Ref 2 above, likely there will be indirect impact on equality of access however not tangible; to clarify, outcome of the Trusts' successful bid is that community services are now delivered through a consortium led by West Suffolk Hospital. Catchment area has increased in direct response to improving access to services for those living along the Suffolk Borders and in direct response to patient feedback).</p> <p>Some examples of ways in which our work takes into account equality and diversity requirements:</p> <ul style="list-style-type: none"> • Flagging the need to develop translated materials for implementation of the national Friends & Family Test. • Engagement with a range of stakeholders across various projects – mapping and flagging additional stakeholders that clients may not have considered, ensuring transparency and ability to evidence full engagement as part of the process. • Specific requests for engagement of service users and other stakeholder representatives in relation to undertaking procurement evaluation processes. • Engagement with a range of stakeholders where service changes will impact directly on them. • Working with partners of consortium bidding for joint delivery of services to assess the real impact of proposed new services on all possible stakeholders. <p>No documented evidence is able to be provided as it contains business sensitive information.</p>
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Clinical Procurement and Market Management

Effective supply chain management and reducing costs, without compromising the patient experience, are fundamental challenges faced by all organisations commissioning health and care services. We are nationally accredited to support commissioners in the procurement of healthcare services and can draw on our extensive experience of developing and delivering sourcing strategies both locally and nationally.

Relevant EDS2 Goals/ Outcome	How equalities is built into what each service line delivers	How this is demonstrated in delivery	Key Examples
<p>1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.3 4.3</p>	<p>At the point of establishing a procurement project all appropriate considerations are made of Equality Act 2010. The provisions of the act are factored in to the development of the procurement documentation and specific questions have been designed to capture compliance information (inc. associated policies) from all potential bidders.</p> <p>Additionally, any contract awarded, as part of our procurement processes includes provision to ensure continued compliance with the Equality Act 2010. The main contract used in management of provider performance is based on the NHS England Standard Contract, where specific terms have been embedded to provide the mechanisms to hold providers to account for actions relating to requirements of the Equality Act 2010.</p> <p>As part of our own internal processes of compliance we ensure all staff are trained and all are required to complete a specific awareness course and undertake an assessment through the organisations online training academy. A full training record is maintained to ensure all staff are given the opportunity to access training and development.</p> <p>Finally, our recruitment of people is considered to be a 'Fair Recruitment Process' by ensuring the full requirements of the organisational equality process are factored into the way we recruit.</p>	<p>Within the bounds of our responsibilities, we strive to influence and shape how equality and diversity are addressed through our support to customers and the procurement and tendering activity we undertake on their behalf.</p> <p>Working in the public sector we must comply with the public sector equality duty and to ensure all our tenders have due regard for equality.</p> <p>We support our customers by:</p> <ul style="list-style-type: none"> • Ensure all PQQ & ITT and all procurement templates have appropriate provisions of equality in the procurement of NHS Clinical Services. • Reviewing any procurement processes to ensure the provisions of the Equality Act 2010 are fully considered and factored in any tender opportunities. • Designing a procurement process or service reconfiguration that has considered the outcomes of any equality analysis and services are designed to meet the needs of patients and service users. • NHS Standard Contracts are used on all procurements, where the national contract has a requirement for providers to give due regard to equality in delivery of services and compliance with legislation. <p>All our procurement tenders are subjected to evaluation and specific reference is made to the requirements to comply and demonstrate how individual organisations comply with the requirements of the legislation.</p> <p>All invitations to tender are evaluated by relevant subject matter experts who assess the submissions for compliance with the requirements set out in the procurement documentation and supporting the project team to address any points of clarification.</p>	<p>For all tenders AGEM take into account a potential provider/supplier approach to equality in terms of its ability to comply with the requirements of the equality act 2010. It does this by asking potential provider/supplier relevant questions and ensures that the appropriate provisions are included in any contract documents relating to these matters issued as part of the procurement process.</p> <p>It is also a requirement of the commissioners to measure and manage the impact of the potential provider/supplier procurement strategy with regard to the promotion of equality during the life of each contract, where equality is deemed to be a core requirement.</p> <p>Our procurement documentation provides templates for:</p> <ul style="list-style-type: none"> • PQQ & ITT documentation, which are used as an aim in the design of procurement processes. • NHS Standard Contract that can be found by reference to the NHS England web site https://www.england.nhs.uk/nhs-standard-contract/15-16/ • Evaluation templates that include the evaluation of equality in procurement process. <p>Appendices 24 – 25</p>

Collaborative Contracting

Whether you require an end to end contracting process, or support for individual projects, we provide a reliable, responsive and structured contract management service. We support the direct commissioning of services across a range of providers and types of services including: acute, non-acute, Any Qualified Provider (AQP), mental health, care home and individual patient placements.

Relevant EDS2 Goals/ Outcome	How equalities is built into what each service line delivers	How this is demonstrated in delivery	Key Examples
1.1 1.2 2.1 2.2	The service supports many contracts as part of the AGEM function. These cover any/all aspects of the Commissioner / Provider relationship for acute, mental health, primary care, CHC, transport and diagnostics services. All new contractual agreements are based on the NHS Standard Contract.	The DoH and more recently NHSE undertook an EHI Analysis (embedded) which is reviewed each year as part of the changes to the NHS Standard Contract. In addition the Host or Coordinating Commissioner should ensure that as the contract is signed a Commissioner EIA form is completed. Although the contract will contain service specifications for some/all of the services provided within the agreed contract, some of the specifications make reference to historic patient treatment pathways and as such may not have been subject to an EIA. However, all new policies and service specifications will have been subject to an EIA which will be agreed and signed off by the lead/host Commissioner before the document/policy/service specification is included within the contract.	The Heart Failure Service specification (GEH 2015/16 NHS Standard Contract) developed by the Provider and Commissioner Clinical Lead makes appropriate reference to accessing the service by all those that are clinically eligible. This document is not available to be shared due to business sensitive information. Standard contract equality analysis Appendices 26 – 28

Commissioning Intelligence

As one of the largest information services teams in the country, our clients include commissioners and providers of health and social care in the public, voluntary and private sectors. This means that we are able to source and use large volumes of data for comparative purposes, share best practice, reduce duplication and provide you with the very best value for money.

Relevant EDS2 Goals/Outcome	How equalities is built into what each service line delivers	How this is demonstrated in delivery	Key Examples
1.1 2.1	As a service line, we support our customers with service re-design and commissioning / de-commissioning of services. Our service contributes to the Clinical Commissioning Group's overall objectives to provide better health outcomes and improve services to suit the needs of the local populations. The analysis we provide allows our customers to make evidence based, considered decisions about the services they provide, improving accessibility of those services to vulnerable groups and how they should be delivered to improve patient experience. This might include specialised analysis, enhanced analytics and delivery against Freedom of Information requests.	Information Services ensure that all staff adhere to the Mandatory Training and the Equality and Diversity element of the e-Learning programme. All staff are encouraged to report any suspicions of discrimination / harassment to their manager. Any issues highlighted are treated as confidential and follow the correct reporting procedure. Line Managers follow a clear recruitment process which supports HR policy relating to Equality and Diversity, to ensure all applications are treated fairly and consistently.	Information Services have worked on a variety of projects with our customers, to improve accessibility of services to those listed as vulnerable, according to the Equality Act 2010. Including: Enhanced Services Project, Urgent Care, Primary Care and Out of Hours accessibility, CCG Commissioning Intentions, Frail and Elderly Projects and Care Home Reviews. We are unable to provide physical evidence to publish due to our work being a sellable product to customers and therefore we cannot put this information in the public domain.

Clinical IM&T

We understand that every organisation is different and has differing needs. The team works with customers to understand business needs for individual products and systems to support day-to-day activities.

Relevant EDS2 Goals/Outcome	How equalities is built into what each service line delivers	How this is demonstrated in delivery	Key Examples
Indirectly (1.2) 1.4	Because our customer base (Patients and staff from GP surgeries) are diverse; our training materials and approach need to reflect this. We are happy to visit our clinical customers to train them in their own practices if this is more appropriate. Conversely if they require disabled access (such as lifts and parking) we can generally accommodate this. We have been asked to fit (& complied with) our training schedules around prayer times during various religious festivals. We have adjusted training times to fit in with specific time requirements around breast feeding, children's school times, etc.	Our customer-facing documentation such as leaflets and posters are generally available in multiple languages. Provisions are also made available for deaf and visually impaired customers. Our touch screen "self-arrival" screens in GP surgeries are multi lingual. Many are placed at a lower level to facilitate use by wheelchair users.	Multi lingual publications. Test patients and examples use names of different ethnicities. The font size on our screens can, and has been, adjusted to larger sizes for ease of reading. Braille provision. Checking of documents with RNIB for content & quality Attendance at Locality meetings for different cultural groups (with interpreters where required). Appendices 29 – 31

IT Service Delivery

We provide tailored, integrated clinical systems using specialist software and tools that give shared access to contact details, documents, and patient records. This is backed up by safe and robust management and information sharing protocols around the appropriate use of patient and personal confidential data.

Relevant EDS2 Goals/Outcome	How equalities is built into what each service line delivers	How this is demonstrated in delivery	Key Examples
1.3 1.4 2.1	IT Service Delivery works within AGEM policies and procedures which includes allowing staff to carry out their mandatory training and to have time to research this before taking the assessments. Our policies around recruitment and management of staff enable us to attract and keep talented employees. Our work place policies and standards prevent discrimination and allow our employees to balance their work and home lives, thus helping us to retain our experienced staff, whilst delivering a high quality service to our clients.	IT Service Delivery adhere to delivering equality by making sure staff who have a specific requirement through disability, age, religion or belief are not discriminated against whilst working in the service and where required suitable adjustments are referenced in service delivery processes and procedures.	IT Service Delivery will work with clients where there is a specific need for vision impairment or dyslexia, large screens can be supplied and dictation software can be used. This is through discussion with service users and what is the most appropriate technologies to use. There is no evidence available to support this as the work the IT services undertake is about providing support online rather than producing products.