



**Surrey Downs  
Clinical Commissioning Group**

# Equality and Diversity Strategy and Action Plan

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## Version control

<b>Version</b>	<b>Comments</b>	<b>Status</b>
Version 1	First draft prepared by Pollymarch Mather and circulated to steering group for comment	First draft circulated
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## 1. Introduction

This strategy sets out how Surrey Downs CCG will meet the equality duties, as set out in the Equality Act 2010, by putting the patient at the heart of everything we do.

This will be achieved via effective engagement and by involving local people in decision making and commissioning of services. Further, it will also be achieved by working in partnership with local people, our local authorities and other health care providers to improve health outcomes for the protected groups as identified under equality legislation. The CCG will ensure that all policies, functions and services carried out either by itself or on its behalf will be subjected to Equality and Quality Impact Assessments (EqIAs) to ascertain any differential impacts on groups with specific protected characteristics and propose actions to address them. This strategy has been developed to move beyond legal compliance and to support Surrey Downs CCG to initiate best practice and to improve working, service conditions and health outcomes.

As public bodies, Clinical Commissioning Groups (CCG) need to have plans in place to meet the requirements of the Equality Act 2010 and the Public Sector Duty which require all public sector bodies to – have due regard to the need to:

- Eliminate unlawful discrimination, harassment or victimisation and other conduct prohibited by the Act
- Advance equality of opportunity between people who share a protected characteristic and those who do not;
- Foster good relations between people who share a protected characteristic and those who do not.

And to:

- Publish sufficient evidence to demonstrate compliance with the general duty
- Prepare and publish equality objectives.

## 2. Vision

### 2.1 Our aims:

- Improve and maintain the health of people living in Surrey Downs irrespective of their protected characteristics, social status and background
- To embed the principles of inclusivity in everything we do
- To effect broader cultural change across the health sector in the way we manage and value and understand equality and diversity

### 2.2 Our role as commissioners is to:

- Understand the health needs of people living in Surrey Downs.
- Design and purchase services to meet the needs identified
- Monitor the quality of health services

- Plan services to meet future health needs
- Fulfil our commitment to be a fair employer

### **3. Key priorities**

Under the Equality Act 2010 the CCG needs to have systems in place to have the desired impact and comply with the equality duty. The CCG needs to ensure that we are having a positive impact on local people, which is leading to reduced health inequalities.

There are two key priorities for delivering on our equality and diversity commitments and responsibilities in the coming years:

1. To address issues of inequity or inequality in partnership with local providers, neighbouring CCGs, local authorities, the voluntary sector, patients and the public.
2. To develop mechanisms and processes within the CCG that ensure this agenda is clearly embedded in all planning and decision-making processes.

Only through focussing on both of the above can the CCG deliver our commitment to reduce inequality and deliver excellent, appropriate, accessible services for all our patients – now and in the future.

### **4. Development of our Equality Goal**

Surrey Downs CCG aspires to integrate the consideration of equality and diversity in everything we do. This inclusive approach will deliver on legal obligations whilst addressing the need to reduce inequitable health gaps in the communities the CCG serves.

As clinically-led organisations the plans are based on what is known about the CCG's population needs and evidence-based provision to meet this need. In this way, the CCG can be assured that equality and diversity is considered from planning to decision making and we will ensure that these services deliver our Public Sector Equality Duty (PSED) commitments, and the equality goals enable our services to be of the highest quality possible and appropriate for our population.

### **5. Equality Delivery System Two (EDS2)**

We are working within the Equality Delivery System (EDS2), (Appendix2). The actions have been set within that framework and are aligned to the EDS2 goals and outcomes. When setting commitments, we have focused on areas that can make a difference and set actions where impact can be measured. In doing so, we have remained mindful not to set targets that cannot be delivered within the allocated timescale, budget and staffing resource.

We are aware that it may become apparent that some of the equality goals may need to be reviewed when the needs of our local communities change or become clearer in focus. Because of this, the goals remain 'live' in that they are open to further input and development from our partners and stakeholders throughout the five years to ensure that any action we take is as effective and responsive as possible.

### **5.1. EDS2 Goal 1: Better Health Outcomes for All**

To ensure we consistently improve health outcomes and address any inequalities in outcome for patients, we will ensure that services are commissioned, designed and procured to meet the health needs of local communities to promote wellbeing and reduce health inequalities. Actions to deliver these commitments include:

- Ensuring the delivery of the actions set out in Carers Strategy
- Develop a Gypsy, Roma, Traveller (GRT) focused action plan in partnership with the GRT forum

The GRT population of Surrey Downs are an important group locally but information and data relating to this group is not routinely, or well, captured. The GRT collectively is one of the largest ethnic minority groups within the Surrey Downs area. Gypsy, Roma and Traveller groups have significantly poorer outcomes than any other group of UK residences. Locally research has shown that this community has higher levels of smoking (48%) high blood pressure (52%) and anxiety/ depression (48%) (Surrey Downs health profile, 2015).

### **5.2. EDS2 Goal 2: Improved Patient Access and Experience**

In order to improve patients' experience of our services and increase access to our services we will ensure that services are planned and delivered with the needs of patients in mind, and that support is in place for those who may face barriers accessing services. This includes making sure that a diverse range of people are involved in shaping our plans and that their experiences of using services lead to service improvements.

### **5.3. EDS2 Goal 3: Empowered, engaged and well supported staff**

We will make sure that we fully understand the diversity of our members and our staff and offer the right support and training so that we are all able to carry out our roles effectively and maintain a healthy life work balance.

### **5.4. EDS2 Goal 4: Inclusive Leadership at all Levels**

The successful delivery of our equality objectives relies not only on ownership and leadership at all levels, but also on embedding equality and diversity throughout all

functions and governance processes. Our Governing Body and managers will be fully aware of the organisational benefits of diversity, in addition to their obligations under equality legislation and there will be clear governance and accountability for equality.

## **7. How we will know we have succeeded**

All of our equality objectives will be aligned to the operational action plans for the CCG to ensure they are embedded in the design and delivery of services.

Milestones and evidence of delivery will be identified for each objective. We will work with community members to review community perspectives on our progress.

We will provide evidence of progress against these objectives to the Quality Committee and Remuneration and Nominations Committee twice per year. These progress reports will be published on our website.

## **8. Embedding equality and diversity into our business**

Ensuring equality and diversity is embedded in the core business of each Directorate is the key to success. NHS Surrey Downs CCG will take further action to ensure that this message is understood; and that it is embedded in every aspect of people management systems at all level through meaningful and measurable criteria in staff personal objectives, appraisal systems and competency frameworks.

A robust system of measurement and evaluation, both at corporate and departmental level, will provide assurance that action plans and the Equality and Diversity action plan are effective. We will continue to monitor progress against targets set at corporate level publicly, through the collection and publication of data on an annual basis.

### **8.1 Roles and responsibilities**

Clear and defined roles and responsibilities are required to ensure that Equality and Diversity is anchored across the business.

An Equality and Human rights lead will have a strategic overview of all four of the EDS2 objectives and goals and will provide assurance to the steer group. The equality and Human rights lead will also lead on the operational requirements of the patient and public facing EDS2 goals and objectives (objectives one and two).

Equality Champions will be recruited across the organisation. The Champions will be trained in completing the EQIA. The champions will promote Equality across the organisation and attend or ensure representation from their team attend the Equality awareness programme that will be taking place throughout 2017.

The Interim Chief Officer will act as the lead director for equality and diversity, supported by the equality and diversity GP lead.

Given the requirements relating to our workforce, human resources are required to lead on, and have ownership of, the goals that sit within objectives three and four of the EDS2.

However, equality and diversity is everyone's business. As such, managers and their staff have a personal responsibility for challenging discrimination and unacceptable behaviour. Managers will receive relevant training; and understand that they must behave in ways which promote a culture of inclusion and equality for all. Departments will monitor this through staff performance against meaningful and measurable personal objectives. This will be achieved through appropriate training and development highlighted in their plans in the values and behaviour section of appraisals. Key Performance Indicators will help to measure progress and development over time.

## **8.2 The governance structure**

The governance structure for the equality and diversity function will sit with the steering group, the Quality Committee, Remuneration and Nominations Committee, and ultimately the Governing Body.

The Steering Group will monitor progress on delivery of the plan within Surrey Downs CCG, and will also formally report on progress to the Quality Committee.

The Remuneration and Nomination Committee will provide advice relating to Human Resource matters to the quality committee.



## Glossary

### **Black and Minority Ethnic (BME)**

People from different ethnic groups, apart from the White British ethnic group. Some definitions of BME also exclude White minority ethnic groups, such as Eastern European or White Irish.

### **Clinical Commissioning Group (CCG)**

An NHS body whose main tasks are to assess local health needs and commission services from hospitals and community service providers. All GP practices are members of their local CCG.

### **Equality Delivery System (EDS)**

A system through which NHS bodies can assess their performance in relation to equality and diversity, grade their current performance, set objectives and action plans for going forward. Involvement of local interests is an essential part of these processes.

### **Equality and Quality Impact Assessment (EqIA)**

An Equality and Quality Impact Assessment (EqIA) is a careful examination of a proposed policy, strategy, service or function to review any impact to quality and to see if it could affect some groups unfavourably, especially minority groups who may experience inequality, discrimination, social exclusion or disadvantage.

Equality and Diversity Action Plan 2016-2019						
	Strategic Actions	Specific actions	Time scale	Measure of success	Lead responsibility	
EDS2 Goal 1: Better health outcomes for all						
1.1: Services are commissioned, designed and procured to meet the health needs of the local population						
	Conduct Equality and Quality Impact Analysis (EqiA) on each of our commissioning priority areas to ensure that commissioning removes negative impact for protected characteristic communities and ensures a positive impact on reducing health inequalities.	To externally review our EqiA system.	December 2017	EqiA method fit for purpose.	Equality lead	
		To train Equality Champion.	January 2017	All Champions are identified and recognised within their team.	Equality lead	
		Conduct EqiA on commissioning priorities.	December 2017	All commissioning intention been assessed.	Equality lead	
	Improve partnership working with all organisations across the heartland to ensure cooperative working, Prevent/minimise duplication, cost efficiency, and ensure that protected characteristic groups are not marginalised. Additionally, ensure that partnership is in line with the STP.	Identify equality leads and key stakeholders from all the organisations within the heartlands.	November 2016	Action plan mobilise.	Equality lead	
		Identify each organisations approach and investigate methods of working together and potential any potential for sharing resource.	Identify December 2016  Action Plan developed March 2017		Equality lead	

		Produce a PAN Heartlands action plan.	April 2018		Equality lead
Ensure that people / organisation who represent all nine protected characteristics have involvement in the designing and commissioning of healthcare services.		Develop a Surrey downs network who member are from the community and reflects the needs of the protected characteristics.	September 2016	Participation action Network (PAN) mobilised. PAN is a network of organisations and individuals that represent the nine-protected characteristic and inform and co design service SDCCG commission.	Engagement
		Draft Equality and diversity strategy and action plan to be reviewed by Surrey County Council equality board. The board will provide input from organisations and individuals who represent all nine protected characteristics.	November 2016	Agreed by Governing Body	Engagement
		Develop an Equality and diversity public engagement plan	March 2017	Plan mobilised.	Engagement

1.2 Individual people's health needs are assessed and meet in appropriate and effective ways					
	Work towards improving health inequalities among protected characteristic groups	Work with external networks and forums with a focus on the protected characteristics as a framework to identify community priorities to ensure that our plans and strategies consider the barriers and challenges faced by all communities within the Surrey Downs area.	December 2016	Participation Action network launched Priorities identified	Equality lead
		To develop a co-design approach within the updated engagement strategy.	February 2017	Mobilisation of PAN	Comms and engagement
		Integrate a targeted communication and engagement approach to GRT and people with learning disabilities as these two groups have the lowest health outcomes.	April 2017	Approach mobilised	Comms and engagement
1.3 Transitions from one service to another, for people on care pathways are made smoothly with everyone well informed					
	Review how our providers identify, flag, share and review people with additional communication needs.	Design a review process of providers' accessible communications process.	January 2017		Equality lead
		Access the accessible communication process			Equality lead

		Adopt a method of auditing the processes			Quality/ governance
<b>1.4 When people use NHS services their safety is prioritised and they are free from mistakes, mistreatment and abuse</b>					
	Deliver on commitments in existing strategies and work that addresses the health inequalities of local protected characteristic communities.	Develop a process to review how data is collected and used across providers	November 2017	Delivered on existing strategies.	Quality
		Review provider's process and identify challenges and successes.	December 2017	Process complete	
		Review the equality monitoring data.	February 2018	Challenges and advantages highlighted.	
		Engage with providers to support any changes required in the equality monitoring data collection process and share best practice across to other providers.	March 2018	Agreed method of data with all providers	
		Reviewed equality monitoring method to be incorporated into provider contractual and procurement arrangement	April 2018		

		Review how additional communication needs are identified across the CCG and providers	June 2018	Review of the Accessible information standard implementation across the organ	
<b>EDS2 Goal 2: Improving Patient Access and Experience</b>					
<b>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</b>					
	To ensure the action set out by the Surrey Downs Information Access Standard implementation plan are delivered.	To comply with the Accessible information standard implementation plan	July 2016	CCG, and all hosted services are compliant with the Accessible information standard	Engagement and Communication
	To produce a directory of certified translation services for CCG staff to have access to when required.	To identify certified translators (both face to face and written) with resource in the area for spoken languages across surrey. To identify certified BSL services	January 2017	To have an accessible document for CCG staff and hosted services to use when requiring translation services	Equality lead
<b>2.2 People are supported to be involved as they wish to be in decisions about their care</b>					
	Engage and work together with key Stakeholder groups and individual carers and patients to ensure there are mechanisms for people and organisation that represent communities and groups be involved in the designing and commission of health care services	Develop a SDCCG stakeholder forum with representation across the nine protected characteristics	November 2017	Forum to input on commissioning and designing health care services.  The forum to present their work at an annual event	Engagement
<b>2.3 people report positive experiences of the NHS</b>					

	Work with our local communities, including communities of identity, to better understand people's experience of planned care services to help inform a wider piece of work reviewing these services across Surrey Downs.	Communication and Engagement strategy to be updated. The strategy and action plan will use the nine protected characteristics as a framework to ensure that equality is at the heart of the inclusive approach	On-going	A communication and engagement plan and log of activity and level of involvement. Data collected to be integrated into service design and commissioning processes. Data to be collected, analysed and compiled into a report to contribute to the following year commissioning intention.	Communication and Engagement
		To include requirements relating to the accessible information standard into revised communications and engagement strategy.	November 2016	Updated strategy approved.	Communication and engagement
		To hold a centre database of equality and diversity monitoring forms from engagement activity and review the data as part of the annual engagement report and the annual equality and diversity report.	January 2017	Annual report to inform commissioning intentions and healthcare services redesign.	Equality lead/ governance
<b>2.4 people's complaints about services are handled respectfully</b>					
<b>FOR THE ATTENTION OF QUALITY</b>					
	Review patient complaints processes.		February	Complaints process is	Quality

			2016	accessible and has clear pathways to	
<b>EDS2 Goal 3 A representative and supportive workforce</b>					
<b>3.1 fair NHS recruitment and selection processes lead to a more representative workforce at all levels</b>					
	Carry out a staff profiling exercise for the CCG directly employed staff		December 2017	Exercise complete	
	Ensure the CCG's recruitment and selection process is fair and consistent.	Implement TRAC recruitment system which ensures managers are carry out shortlisting appropriately with an accurate score card for results. Allowing for more accurate reporting on Recruitment	April 2016	TRAC recruitment system in place	HR
<b>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</b>					
	All jobs descriptions are evaluated in line with the AFC framework.	Ensuing Job descriptions are up to date and that managers ensure they are reviewed as part of the Appraisal system. With HR carrying out spot checks on department to review incoming appraisals	April 2017	All employees in the CCG to have a current Job Description	HR
<b>3.3 Training and development opportunities are taken up and positively evaluated by all staff</b>					
	HR to monitor the training and development of staff in appraisal.	To hold meeting with HOS to review appraisals and training need in the departments	Ongoing	To ensure training accessible for all staff	HR
	The CCG should be working in line with a Learning and Development Policy to ensure all staff in the CCG have an equal	Learning and Development policy to be made final and circulated to all staff.	October 2016	To have a L&D policy in the CCG	HR



	opportunity for training and development				
<b>3.4 When at work staff are free from abuse, harassment, bullying and violence from any source</b>					
	Recruit Equality and Diversity champions who are trained in EqiA across the organisation.	To identify one Equality Champion per team	December 2016	Equality Champions in post	HR
		Develop a Equality and Diversity Champion Role description	December 2016		HR / equality lead
	Recruit In House equality and diversity trainers	Identify appropriate training course for the trainers	December 2016	In house training programme mobilised	HR
		Deliver EqiA training across the CCG	January 2017	All training activity and awareness activity has been completed	
	Provide equality and diversity training to staff at all levels, with particular focus on managing equality and diversity; bullying and harassment; reasonable adjustments and monitor up-take.	To provide in house awareness training to all staff at all levels	December 2017	Training complete	HR
		Develop a training schedule ( including identifying key speakers for lunch and learns).	December 2016		HR
		Equality and diversity training programme delivered across the organisation.			HR
	Increase staff awareness and competency	Internal equality and diversity communication and	November 2017	Awareness campaign mobilised	Communications

		engagement plan.			
		Hold regular staff briefings where all staff are encouraged to participate, share information, ask questions and raise concerns	On-going		Communication / equality lead
		Develop a visible publicised code of conduct in relation to equality and diversity			
		Develop materials for internal awareness of the nine protected characteristics			
		Create E&D section on staff intranet)	January 2017		Communications
<b>3.5 Flexible working options are available to all staff consistent with the needs of the service and the way people lead their lives</b>					
	Identify member of staff that may require flexibility and support	Identify informal carers needs through the staff survey	January 2017	Process of identifying informal cares mobilised	HR
		Develop a process of identifying carers	March 2017		HR
		Update the induction pack to provide information on informal caring.	March 2017		HR

<b>3.6 Staff report positive experience of their membership workforce</b>					
	Review and compare staff experience through the staff survey	Analysis staff surveys to mark trends across the criteria and any changes to be highlighted from the past 5 years	January 2017	Survey finding circulated Equality and diversity annual report	HR
<b>EDS2 Goal 4: Inclusive Leadership</b>					
<b>4.1 Boards and senior leaders routinely demonstrate their commitment to promoting equality within and beyond their organisation</b>					
	Develop and implement succession plans to work towards ensuring that the governing body and clinical leads represent the diversity of the GP members of the CCG	Equality and diversity strategy plan to be reviewed by the quality committee	November 2016	Strategy and action plan complied with governance requirement	Equality lead
		Equality and diversity strategy and action plan to be reviewed by Governing Body	November 2016	Strategy and action plan complied with governance requirement	Equality lead
	Ensuring transparency	A report to be compiled annually for Governing Body	January 2017	Report reviewed at governing body	Equality lead
		Reports to be in the public domain	February 2017		
		Annual review of our compliance of EDS2 to go to the Participation Action Network. PAN is the CCG community forum which has	January 2018 and recurring	EDS2 complete	Equality lead

		representation from across the 9 protected characteristic from a grassroots level.			
<b>4.2 Papers that come before the board and other major committees identify equality- related impact including risk, and say how these risks are to be managed</b>					
	Review the equality section of the front sheet template in all decision making meetings to ensure they clearly describe how the proposals deliver the equality duty			Equality section of front sheet template modified	HR
<b>4.3 Middle managers and other line managers support their staff to work in a culturally competent way within a work environment free from discrimination</b>					
	Develop the equality and diversity steer group ensuring that the members are trained and competent to lead on the embedding of equality and diversity.	To investigate training programmes which provide an in depth understanding of the complexities and needs around each protected characteristic.	December 2016	Training programmes identified	Equality lead
	Ensure that all heads of service are culturally competent through in house training.	To deliver equality training to heads of service and how to manage adverse behaviour in the team	January 2017	Training mobilised	HR
		To investigate organisation that are delivering awareness training on: Gypsy Roma travellers Learning disabilities	December 2016	Organisation identified	equality

		To investigate different suppliers of training and to ensure that it is appropriate and meets the needs	December 2016	Suppliers identified	HR
	Ensure that the CCG has appropriate resource to embed equality and diversity in to the Clinical Commissioning Group	To review the man power required to meet the governance needs, training needs and operational management needs.	December 2016		Equality
		Investigate the costs of external services	November 2016		Equality lead