

Public Sector Equality Duty Report January 2017

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Executive Summary

The purpose of this report is to assure the people of Wakefield that the Clinical Commissioning Group (CCG) is compliant with the Public Sector Equality Duty (PSED) and committed to equality and inclusion.

This report provides an annual update of activity undertaken to embed equality within the organisation and its activities.

The CCG's vision for people who live and receive health services in Wakefield, people who work for the organisation and those involved with the CCG is:

"..to commission quality services that will improve our patients' experiences of care and their health outcomes. A key part of this will be to involve and listen to our patients, practices, partners and staff when redesigning services.

We believe that we will be successful if we work in a creative and empowering environment that is supportive and stimulates innovation. Our vision will forge effective joint solutions delivered in partnership across organisations that will be patient-centred."

Underpinning the vision are core values for staff complementing the equality principles embodied within this document:

- Putting patients at the heart of all commissioning decisions;
- Fostering strong partnerships between and within member practices to enhance the commissioning of services for the whole health economy;
- Identifying and sharing good practice;
- Building health alliances with Wakefield Council, Public Health and other partners in the wider health economy

- Encouraging public and patient participation to enhance service improvements;
- Commissioning high quality, safe services.

The CCG recognises that different patients and carers use and experience health services differently, they may experience health inequalities and have diverse of needs. This has to be fully considered when planning and commissioning services.

To deliver this we need accurate quantitative and qualitative intelligence from our providers and from patients and carers.

We talk to our communities; we consult and engage to listen to their views. We have a Public Involvement and Patient Experience Committee (PIPEC) which assures our engagement activity. Members include the public and representatives of local third sector organisations and community groups that represent different communities. We are active members of Wakefield Council's Equality and Cohesion Partnership.

Equality Act and the Public Sector Equality Duty (PSED)

Publishing equality information and setting equality objectives are part of the CCG's compliance with the Equality Act (2010) and one of the ways the CCG demonstrates meeting the Public Sector Equality Duty. For more information visit;

- [Equality Act](#)
- [Public Sector Equality Duty](#)

Equality

Wakefield CCG aims to ensure that protected groups¹ have the same access, experiences, and outcomes as the general population. The CCG recognises that there are many things that influence this that it may not have control over, but it is committed to work with partners and the community to influence where it can, including by;

- Reducing inequalities in health outcomes and experience. This will be achieved by working in partnership, including Wakefield Council and others, to address community need as described in the [Joint Strategic Needs Assessment \(JSNA\)](#);
- Removing barriers or inequalities faced by protected groups accessing healthcare, including making reasonable adjustments. Our service specifications will reflect this requirement for providers to address inequality and we will in our policies and practice;
- Promoting and actively involving patients and their carers in decisions about the way their health care is provided and the methods we use to design and commission health services, so they are relevant, appropriate and meet the needs of the population we serve.

¹ Protected groups – Age, disability, sex, sexual orientation, ethnicity, gender reassignment, religion and belief, pregnancy and maternity, and marriage and civil partnership.

Population Profile

NHS Wakefield Clinical Commissioning Group (CCG) plans and buys health care services for a total registered population of 367,360 (1 October 2016) across 40 local GP practices.

For a breakdown of the population profile please visit:

- [Wakefield State of the district report 2015](#)
- [Joint Strategic Needs Assessment \(JSNA\)](#)
- [Wakefield Health Profile 2015](#)

Population by Protected Characteristics

People can have different experiences and outcomes when they use NHS services, this can result in inequalities that affect broad groups of patients.

Health inequalities are not only apparent between people of different socio-economic groups for example, different incomes, but also exist between the sexes, different ethnicities, older people and people with mental health problems or learning disabilities. The causes of health inequalities are complex, and include lifestyle factors such as smoking, nutrition and exercise as well as wider determinants such as poverty, housing and education.

For more data and information on social and health inequalities in the Wakefield District please visit [Wakefield Observatory](#).

Wakefield Health and Wellbeing Plan (draft)

The Wakefield health and social care system, under the Health and Wellbeing Board, have agreed a set of high level outcomes. The CCG will work with partners to deliver these by 2021. The plan is available [here](#).

Wakefield Commissioning Principles

Underpinning the strategic plan of Wakefield CCG is a set of commissioning principles; these are integral to ensuring equitable outcomes for all patients and are detailed in our [Commissioning Policy](#).

Equality Impact Assessment (EIA) is used to ensure the commissioning process takes account of the needs of protected groups. The EIA process is integrated with quality, privacy and system assessments.

Equality Objectives

In 2014, the CCG developed four equality objectives; these were developed following the implementation of the Equality Delivery System with local people, groups, and staff.

- Equality Objective 1: Increasing screening rates for cervical and bowel cancer screening
- Equality Objective 2: Ensure access to local health provision for EU communities and improve the experience and confidence of the transgender community
- Equality Objective 3: Enhancing member practice engagement (clinical network to be agreed)
- Equality Objective 4: Improving data quality and intelligence gathering and analysis, that informs evidence based commissioning and service improvement.

Progress on the equality objectives is monitored by the Integrated Governance Committee.

Equality Objectives - Progress 2016

In 2014 our GP Practices were organised into seven geographical groups called networks. Their purpose was to work together to address the health needs of their communities and local population. In 2014/15 networks developed Health Improvement Plans. These linked to the CCG's equality objectives as they addressed health inequalities, or improved access for protected groups.

Equality Objective 1: Increasing screening rates for cervical and bowel screening (Ethnicity)

Network 5 – Improving cancer screening uptake

Practices have put in place robust systems to identify patients who have failed to respond or not attended their bowel/breast screening invitations. They have developed systematic processes to follow up these patients reiterating the importance of screening to understand the reasons for them not responding to or attending the screening invitation.

In 2015/16 638 patients were contacted following a failure to respond to either their bowel or breast cancer screening invitation.

Practices tailored their Practice information systems / notice boards / newsletters to link into national NHS Cancer Screening campaigns. Practices also utilised other health initiatives such as 'flu clinic' days to talk to patients about screening.

Practices have accessed patient information leaflets in multiple languages describing how to use the bowel screening kit along with a link for an animation showing how the kit should be used.

Equality Objective 2: Ensure access to local health provision from new EU communities and improve the experience and confidence of the transgender community.

Eastern European research project

We have worked with Wakefield Council to develop a survey to gather the views of the local Eastern European community on their experience of living in Wakefield district.

To support our understanding of the Eastern European community we have;

- talked to young people about accessing and using local health service at Agbrigg and Bellevue Community Centre. We plan to attend classes for English as a second language.
- been in contact with key local employers of staff from Eastern Europe requesting to come and talk to their employees
- use current engagement opportunities to gather views and feed these into our patient experience workstream (our mechanism for capturing feedback on local services)
- Network 5 organised a session on the needs and experiences of people from Eastern European countries. This awareness session, delivered by the Wakefield European Centre, was held to help raise understanding among practice staff of the perceptions and understanding of the NHS among the Eastern European community and some of the barriers they might be experiencing in accessing local services.

Transgender Community

The CCG is a member of the West Yorkshire Trans Equality Multi-Agency Partnership Group.

The Care Home Vanguard Team met with Trans Wakefield (a local transgender community group). They supported the vanguard team and care home staff to be able to offer advice and support to transgender care home residents.

Equality Objective 3: Enhancing member practice engagement

2015/16

In 2014/15 networks developed Health Improvement Plans, each Network agreed two priorities for 2014/15-2015/16. These linked to the CCGs equality objectives as they addressed health inequalities, or improved access for protected groups.

Outcomes from this work are detailed below:

Network 1 – Caring for people with low level mental health problems

Strong working relationships were forged with partner agencies, including Wakefield Council and Wakefield District Housing (WDH). A patient survey was developed and conducted on low level mental health services required for the Castleford population.

Results from the survey influenced the future commissioning of mental health services for Wakefield. For example, a talking shop was included

in the service specification for Improving Access to Psychological Therapy (IAPT) services. The tender for this service was awarded in 2016.

Riverside Medical Practice has piloted Big White Wall (a 24/7 on-line mental health service providing safe, anonymous support for those struggling with common mental health issues). It provides peer and professional support (with trained counsellors online at all times), and a range of wellbeing tools to help people self-manage.

Practices are committed to provide KOOTH, a similar on-line counselling service for young people aged between 11 and 24, commissioned by the CCG.

Network 2 – Ensuring all practices become dementia friendly

Close working relationships have been forged with partner agencies, the Health and Wellbeing Team, Alzheimer’s Society, Age UK, and Wakefield Dementia Forum.

A Nurse Practitioner and Patient Reference Group (PRG) member trained as a Dementia Friends Champions. Over 85% of the Network’s staff became Dementia Friends following training delivered by the Alzheimer’s Society and the Dementia Friends Champions.

Each PRG completed The Kings Fund ‘Is your health centre dementia friendly?’ assessment tool kit and worked with the Alzheimer’s Society to carry out a ‘walk through’ of their surgery. Each developed an action plan as a result and subsequently joined the Dementia Action Alliance.

Each Practice will ensure carers of people with dementia are supported as early as possible after diagnosis by;

- signposting to Age UK and/or Carers Wakefield (if agreed by the patient) offering a Carers Health check and flu immunisation once a year.
- providing information about the Alzheimer's Society's carers' awareness session.
- registering with the Safe Places scheme in Wakefield, with practice staff being made aware of the extra support this offers their community.

Network 3 – Improving access for patients with sensory impairment

Wakefield District Sight Aid and the Wakefield and District Society for Deaf People delivered training on sensory impairment awareness. They also undertook practice walk-throughs to identify barriers posed to sensory impaired patients.

A survey was undertaken with sensory impaired patients asking for their experiences and any barriers to accessing primary care services. 145 people responded. Practices identified and implemented at least one change to their services that improved accessibility to sensory impaired patients.

Changes included;

- redesigning signage,
- slowing down the patient call screen,
- changing the font style and size on correspondence to Verdana 16,
- changing any notices to yellow paper with black/blue font in the recommended font style and size,
- putting up tactile signs for the toilets,
- purchasing a mobile induction loop, and

- reproducing the practice leaflet with large print and no illustrations.

The work carried out by practices in Network 3 has continued with Wakefield and District Society for Deaf People carrying out training for other practices.

Network 5 priorities are improving the health of black and ethnic minority populations, including people from Eastern Europe which also contributed to the CCG's Equality Objectives 1 and 2.

Network 7 – Addressing unhealthy risk-taking behaviour in young people

Work has been undertaken with voluntary sector organisations and Spectrum Community Interest Company to ensure the positive promotion of sexual health and substance misuse.

All practices are registered with Spectrum and received Chlamydia testing packs for young people.

The network commissioned Young Inspectors from the Wakefield Youth Association to support them in becoming accredited as young people friendly.

This work included:

- Mystery shopping.
- A young person's survey compiled by the young inspectors and distributed to all the GP practices.
- Young inspectors visiting practices and interviewing practice staff.

A subsequent report of findings has been discussed by practice managers and they have to agree short term actions to improve experience for young people.

Education sessions were held for all clinical and non-clinical staff focused on young people.

In March the eight practices were awarded their 'Youth Approved' accreditation by the Young Inspectors.



Plans for 2016/17

In the Wakefield Practice Premium Contract 38 practices are required to be 'Young Person Friendly' accredited.

This includes;

- all reception staff having received training in assisting young people get the best from the practice;
- access to resources specifically for young people via its website;
- and

- the practice providing a dedicated clinical advice service for young people at least once per week. This requirement is in response to the recommendations of a survey of over 1,500 children and young people carried out in 2015 by Young Healthwatch Wakefield.

Sixteen practices across the district were interviewed by Wakefield Youth Association – twelve during the summer holidays and the remaining four during October half term. A report of the findings will be produced by Wakefield Youth Association by the end of December 2016.

There is also a requirement for all Wakefield GP practices to become dementia and sensory impairment friendly by 31 March 2017.

A total of twenty one practices are now Dementia Friendly. Five Sensory Impairment training sessions have been organised by Age UK each practice can send up to four people to become Sensory Impairment Champions.

There is work ongoing to develop a robust care pathway for people with dementia and their families/carers. Engagement with the public and professionals is taking place during November 2016 to January 2017.

A total of twenty-six practices have already received sensory impairment training and have implemented changes over the last 2 years.

Equality Objective 4: Improving data quality and intelligence gathering and analysis, that informs evidence based commissioning and service improvement.

The CCG has developed an integrated impact assessment incorporating equality, quality, privacy and system impacts. This will develop and mainstream equality into the commissioning cycle and its performance monitoring process.

Supporting the CCG to deliver objective 4 are; the Equality Delivery System 2 (EDS2), Workforce Race Equality Standard and the Accessible Information Standard. These are required for the CCG and local NHS providers and others.

Accessible information Standard (AIS)

The '[Accessible Information Standard](#)' establishes a framework so patients and service users (carers and parents) who have information or communication needs relating to a disability, impairment or sensory loss, receive accessible information and communication support when accessing NHS or adult social services.

To prepare for the AIS the CCG has;

- developed briefings for providers, CCG staff and GP practices and briefing sessions undertaken.
- undertaken surveys with GP practices to understand the support they need to implement the standard and used the feedback to shape and develop bespoke resources
- provided advice and guidance to health care organisations and their staff to implement the Standard and made contact to ensure they are making progress against the Standard
- promoted and raised awareness of the Standard with healthcare organisations and CCG staff
- Worked with Wakefield Society for Deaf People to create a communication passport to support deaf and hearing impaired

people get the right communication support in healthcare settings.

Equality Delivery System 2 (EDS2)

The [Equality Delivery System 2](#) helps the CCG, in discussion with local partners and people, review and improve their equality performance. The CCG's EDS2 report is [here](#).

This year the CCG is working in partnership with other NHS organisations including the Mid Yorkshire Hospitals Trust (MYHT), Yorkshire Ambulance Service (YAS) and South West Yorkshire Partnership Foundation Trust (SWYPFT) to deliver a joint approach to engaging with local stakeholders. A Wakefield Equality Panel has been created with membership drawn from a range of community and voluntary sector organisations representing each of the protected characteristics. The panel will grade the CCG and participating NHS organisations against a set of EDS2 outcomes. We will use the data from the grading panel to inform the development of a new set of Equality Objectives. The CCG will publish a report with the results from the panels and the EDS2 grades by April 2017.

Workforce Race Equality Standard (WRES)

The [WRES](#) requires NHS organisations to demonstrate progress against 9 indicators of workforce equality. A Workforce Disability Equality Standard will be introduced in 2018. The CCG WRES report is [here](#).

Wakefield CCG Staffing Including Governing Body Members

To ensure that Wakefield CCG staff work in an environment where they can excel, develop and do not experience discrimination, harassment or victimisation the CCG has a broad range of HR policies. Staff undertake regular equality and diversity awareness training.

The compliancy rates as at 30th November 2016 are presented in the table below:-

Training Compliance	Employee	Governing Body
Equality, Diversity and Human Rights	75%	88%

We recognise a diverse and representative workforce is best able to design and commission effective and appropriate health care for the local community. As an employer of over 150 staff, 180 at the end of November, we have a duty to publish information relating to employees who share protected characteristics. Data reported is summarised to avoid publishing person identifiable information; identifying staff against their protected characteristics.

Workforce data as at 30th November 2016;

Ethnicity

81% of workers are White British. 6.5% Asian/Asian British, 4% Black or Black British and 6% have preferred not to say.

Age

Under 25	5%
25-34	15%
35 – 44	25%
45 – 54	38%
55 – 64	17%
65+	0.5%

Sex

73% of workers are female and 27% male.

Disability

2% of workers declared a disability.

Religion and Belief

59% are Christian, 12% Atheist, 3% other religions. 22% do not wish to disclose their religion and 4% not stated.

Sexual Orientation

78% are heterosexual, 2.5% gay/lesbian, 0.5% undefined and 19% did not wish to disclose their sexual orientation.

Gender Reassignment

No information is available.

Pregnancy and Maternity

There are 2 employees on maternity leave.

The Department of Work and Pensions, has replaced the "Two Ticks" positive action scheme with Disability Confident. NHS Wakefield CCG is now a Disability Confident accredited employer.

The CCG have signed the charter which encompasses a number of voluntary commitments to encourage employers to recruit, retain and develop disabled staff, such as offering work experience opportunities and implementing a flexible recruitment process.

Patient involvement and engagement

Wakefield CCG are committed to work with patients and partners and engage them in the planning and designing of health services to improve their access, experience and outcomes.

The CCG tailors each engagement to the needs of the public, patient or carer groups, it takes account of the needs of different protected groups, making efforts to ensure it reaches seldom heard people and groups. In this way we can be assured that we understand and respond to the local community. All engagement activity is equality monitored so we can ensure we reach a representative sample of the local population. We target groups who are underrepresented and those who may be most affected by the engagement topic. We then use this intelligence to analyse the responses to see if any trends emerge for different protected groups and this supports the equality impact assessments.

The [patient and public involvement annual report](#) provides an overview of the CCG activity that took place during 2015/16, and engagement planned for 2016/17. It includes the ways in which the local population can and have been involved during the year. The report includes the outcome of the CCG's engagement on the Equality Delivery System during that year.

Provider Relationships and Contract Monitoring

CCGs can commission a variety of service providers, NHS hospitals, social enterprises, charities, or private sector providers as long as they meet NHS standards and quality.

As a commissioner of health care, the CCG has a duty to ensure that all of our local healthcare service providers are meeting their statutory equality duties.

Our main NHS provider organisations are:

- the Mid Yorkshire Hospitals NHS Trust
- South West Yorkshire Partnership Foundation Trust (SWYPFT)
- Yorkshire Ambulance Service

Most provider organisations are subject to the specific equality duty and have published their own data. These are available here:

[SWYPFT](#), [Mid Yorks.](#) and [YAS](#)

If you would like to be involved in the future work of NHS Wakefield Clinical Commissioning Group or would like to share your views on local health services, please contact us in any of the following ways

Go online: <http://www.wakefieldccg.nhs.uk/>

Call us on: 01924 213050

Twitter: @nhswakefieldccg

Facebook: NHS Wakefield CCG

Write to us at:

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