



North Central London
Integrated Care Board

23/24 Equality Delivery System Grading Report

nclhealthandcare.org.uk

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1. Introduction

This report summarises how NCL ICB is against the Equality Delivery System 2022 (EDS2022) improvement framework.

The Equality Delivery System (EDS) is a system that helps NHS organisations improve the services they provide for their local communities and provide better working environments, free of discrimination, for those who work in the NHS, while meeting the requirements of the Equality Act 2010. The EDS was developed by the NHS, for the NHS, taking inspiration from existing work and good practice. It originally comprised of 14 objectives addressing equality on a colleague and service user level that had to be evaluated every three years by a group of colleagues and stakeholders.

EDS22 underwent an update in 2022 and became EDS2022. It now comprises three Domains and 11 objectives.

- Domain 1 considers patients and local communities and comprises 4 objectives to assess how inclusive the organisation is for patients.
- Domain 2 considers the workforce and comprises 4 objectives to assess how inclusive the organisation is for its workforce.
- Domain 3 considers the Board and comprises 3 objectives to assess Board inclusion.

To meet the mandated requirements for 2023/24 a series of grading events took place between August 2023 to February 2024 with staff, including staff networks, , trade union representatives and patients exploring how the organisation was performing against all 11 EDS2022 objectives. Participants at the events were required to provide a score for each of the 11 areas and this led to one of 4 grades being assigned to each objective:

1. Excelling – organisation has undertaken work that exceeds the requirements of the objective.

2. Achieving – organisation has undertaken programmes of work that meets the requirements of the objective
3. Developing – organisation has undertaken some programmes of work that meet the requirements of the objective but further work is required
4. Under-developed – organisation is required to undertake further programmes of work to meet the requirements of the objective.

The majority of the EDS grading outcomes for the activities and objectives under domain 1 were assessed as '**Achieving**' or '**Excelling**'.

The majority of the EDS grading outcomes for the activities and objectives under domains 2 and 3 regarding workforce were assessed as '**Achieving**', '**Developing**' and one area within domain 2 (recommending the organisation as a place to work) was assessed as '**under achieved**'. The areas under domain 2 and 3 will be further developed as part of phase 2 of the OD plan within the 2 pillars of Support, Compassion and Wellbeing, equity and diversity and learning and innovation.

2. Domains – Areas of Assessment

In line with the EDS2022 requirements, 2 service lines were assessed for Domain 1. The service lines selected were Inclusion Health (Case Study 1) and Sickle Cell (Case Study 2). In terms of Case Study 1, Enfield and Islington Health Homeless teams engaged with 8 patients who provided their views on the objectives and their gradings. For Case Study 2, conversations were held with 6 people (10% of the people involved in the project) via Disability Action Haringey, who were able to provide their views and grades as part of the feedback process. Parties engaged with for both Case Studies are further detailed within the EDS2022 Reporting Summary document.

In terms of Domain 2 and 3, the organisation was assessed as a whole to understand how staff felt the organisation was performing in terms of staff support and Board inclusion. Since this is NCL ICB's first EDS2022 assessment, it was important to create a baseline by reviewing the organisation in its entirety.

3. Grading Process

Domain 1

A series of patient and stakeholder engagement sessions or surveys were held or undertaken, for both case studies, between August 2023 and February 2024. These sessions/surveys were held with stakeholders or patients who had direct experiences of the services they were evaluating. As such, they could share with us the areas they believed required improvement and they were also able to evaluate each objective with a personal lens, based on their own experiences.

Each engagement session attendee was asked to provide two grades for each objective for their respective services. The first grade outlined their view/experience of the service when they first engaged with it. The second grade was regarding their view/experience of the service once they had utilised it. As EDS2022 had not been undertaken before, and while not relevant to the assessment itself, this was especially important to us to help us understand whether the attendees care and experience of the service had improved or deteriorated over the course of their treatment.

Attendees were provided with details of the grading matrices as well as the criteria relating to each objective. They were asked to make a judgement on the grades they assigned to each objective and their feedback was collected post event.

Domain 2 and 3

We undertook a series of grading events from February to March 2024, involving staff, representatives from across all functions in the ICB, staff networks and Trade Unions, as required as part of the EDS2022 guidelines.

Each objective was addressed individually by an external facilitator who had been provided with the evidence base to support the work being undertaken by NCL ICB to meet each objective. The facilitator addressed each objective one at a time,

outlining the evidence, data, metrics and examples they had collated relating to the EDS2022 objective they were leading on. Attendees were provided with scoring sheets with a 'yes/no' checklist that addressed each point of the criteria for each grade for each objective. The presentations provided attendees with an explanation of how the evidence base applied to the criteria and attendees were asked to provide a specific grade in line with the EDS2022 scoring matrix.

Attendees were asked to listen to the presentation, review the evidence provided, ask questions and make a judgment on which grade they believed the organisation had attained using the EDS2022 scoring matrix criteria and record their grades and comments on anonymised forms. Once attendees had completed their grading for one objective the presentation for the next objective was delivered and attendees were provided with time to undertake the grading. This was carried out for all 7 combined Domain 2 and 3 objectives.

Upon completion of the event, attendees had the opportunity to provide general feedback before submitting their forms to the facilitator for review. Results were anonymised and collated to provide an overall grading and feedback summary to help improve understanding on how to further inclusion throughout the organisation.

4. Summary of Results

The following table provides an overview of the grading breakdown in accordance with objective and case studies (where applicable). Further details on this can be found within the EDS2022 Reporting Summary Document.

The scoring matrix calculates the number of points obtained for each objective to help identify areas that are strong and areas for improvement. We scored 24.21 points in total which under the EDS2022 scoring guidance equates to an 'Developing' grade. It should be noted that because Domain 1 had two Case studies, an average of the grades for each objective was taken.

Objective	Under-developed	Developing	Achieving	Excelling	Overall Grade	
1A* - Patients (service users) have required levels of access to the service	0	0	1	1	Achieving/Excelling	2.5
1B* - Individual patients (service users) health needs are met	0	0	1	1	Achieving/Excelling	2.5
1C* - When patients (service users) use the service, they are free from harm	0	0	2	0	Achieving	2
1D* - Patients (service users) report positive experiences of the service	0	0	0	1	Excelling	3
2A** - When at work, staff are provided with support to manage obesity, diabetes, asthma, COPD and mental health conditions	3	18	6	1	Developing	1
2B** - When at work, staff are free from abuse, harassment, bullying and physical violence from any source	4	10	13	1	Achieving	2
2C** - Staff have access to independent support and advice when suffering from stress, abuse, bullying harassment and physical violence from any source	0	9	16	3	Achieving	2
2D** - Staff recommend the organisation as a place to work and receive treatment	12	7	9	0	Under-developed	0
3A** - Board members, system leaders (Band 9 and VSM) and those with line management responsibilities routinely demonstrate their understanding of, and commitment to, equality and health inequalities	2	8	14	4	Achieving	2
3B** - Board/Committee papers (including minutes) identify equality and health inequalities related impacts and risks and how they will be mitigated and managed	2	10	10	6	Developing/Achieving	1.5
3C** - Board members and system leaders (Band 9 and VSM) ensure levers are in place to manage performance and monitor progress with staff and patients	5	11	11	1	Developing/Achieving	1.5
				Total	Developing	20

*The overall grades achieved by each case study

**The full breakdown of grades allocated by all colleague and stakeholder attendees

5. Event Evaluations

Domain 1 feedback was generally positive with many attendees feeling pleased to have their opinions included and hopeful that they would be able to contribute to organisational changes.

For Domain 2 and 3, attendee feedback was requested as part of the grading form. All 28 colleagues provided feedback on each objective as part of the grading event. Out of 28 attendees, 17 attendees chose to provide share their feedback on the event and the organisation as a whole, while 11 attendees did not share their thoughts on this. While much of the feedback was positive, it was the consensus that future events should be facilitated by the subject matter experts who contributed to the evidence base for each objective, who were able to answer more in-depth questioning. Additional comments outlined a need for more promotion of the services and support available to colleagues as well as the equality initiatives currently in place. Many attendees highlighted a lack of knowledge and felt that while evidence was presented to support a number of objectives, because they had no direct knowledge of it, they did not feel comfortable to comment on the organisations performance. This was true for all objectives, with a minimum of at least one person highlighting they lacked knowledge for each objective. The objective that had the most attendees highlighting a lack of knowledge or feeling unable to grade accurately was Objective 2A.

6. Next Steps

The majority of the EDS grading outcomes for the activities and objectives under domains 2 and 3 regarding workforce were assessed as **'Achieving'**, **'Developing'** and one area within domain 2 (recommending the organisation as a place to work) was assessed as **'under achieved'**. The areas under domain 2 and 3 will be further developed as part of phase 2 of the OD plan within the 2 pillars of Support, Compassion and Wellbeing, equity and diversity and learning and innovation.

In terms of future grading events, the following changes will be made to strengthen engagement from staff and key stakeholders:

- Better promotion of events, organisational workforce initiatives and programmes of work with significant lead up time
- Subject matter experts facilitate events going forward
- Attendees are fully representative of the organisation or community demographic profiles
- Availability of in person, virtual and accessible events
- Review and update of grading form

Recognising the ICB needs to significantly improve the equality, diversity and inclusion performance in some key areas, the equity and inclusion part of the ICB's phase 2 action plan will now move beyond the scope of the initial 3-year OD plan in this area. The ICB will get more expert external support to improve practices in our approach to inclusive recruitment and further closing the gender gap, particularly at senior levels.

The ICB will look to develop an EDI programme with specific and tangible actions and set targets in line with the **NHS Equality, Diversity and Inclusion (EDI) improvement plan**¹ with engagement and input from the staff networks, People & Culture Oversight Group, Trade Unions and external expert support.

The EDI improvement plan sets out targeted actions to address the prejudice and discrimination (both direct and indirect) through behaviour, policies practices and cultures and will focus on the following key areas:

- Board and Executive Management Teams to have EDI objectives that must be assessed as part of the annual appraisal process.
- Embed fair and inclusive recruitment processes and talent management strategies that target under-representation and lack of diversity.
- Develop and implement an improvement plan to address gender, ethnicity and disability pay gaps

¹ [NHS equality, diversity, and inclusion improvement plan \(england.nhs.uk\)](https://www.england.nhs.uk/equality-diversity-and-inclusion-improvement-plan/)

- Develop and implement an improvement plan to address health inequalities within the workforce.
- Create an environment that eliminates the conditions in which bullying, discrimination, harassment and physical violence at work occur.

The North London Partners Shared Service (NLPSS) provide a recruitment service to many of the NHS organisations across the North Central London. NLPSS recently undertook an inclusivity audit and will be taking forward recommendations to strengthen inclusive recruitment. The ICB is planning to join NLPSS in early 2025 and will be able to take forward these recommendations as part of our EDI programme.

Please see the 23/24 Equality Information Report and People & Culture Annual Report for further information. The priorities and actions linked to EDI are set out in the People & Culture Annual Report.