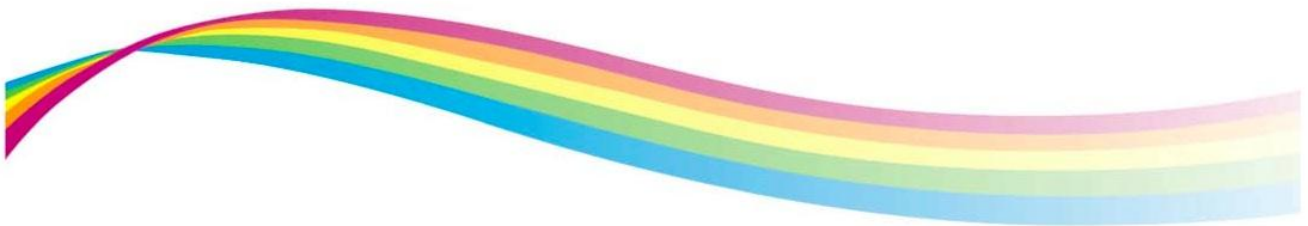


# Equality, Diversity and Human Rights Strategy & Implementation Plan 2013 - 2017

This document sets out Vale of York Clinical Commissioning Group's commitment to advancing equality, diversity and human rights. It outlines our equality objectives and how we will achieve these.

November | 2015



## Table of Contents

---

### Table of Contents

1	Foreword .....	3
2	Accessibility.....	3
3	Introduction .....	3
4	Definitions .....	4
5	Why have we developed this strategy? .....	5
6	About Us .....	5
6.1	Our staff.....	5
6.2	Our Population.....	6
7	Our Approach to Promoting Equality .....	8
7.1	Leadership and Governance.....	8
7.2	NHS Equality Delivery System.....	8
7.3	Equality Impact Analysis .....	9
7.4	Communications and Engagement.....	11
7.5	Partnerships.....	13
7.6	Publishing Information .....	14
8	Our Equality Objectives.....	14
8.1	Monitoring and Review .....	16
9	References.....	17

### Supporting Documents:

Attachment 1 – Legal Equality Duties

Attachment 2 – Population and Health Inequalities Data

Attachment 3 – Equality Delivery System Assessment

Attachment 4 – Human Rights Act 1998 and Health

Attachment 5 – Vale of York Equality Analysis Template

Attachment 6- Strategy Implementation Plan

## 1 Foreword

---

NHS Vale of York Clinical Commissioning Group (CCG) is proud to introduce its Equality, Diversity and Human Rights Strategy and Implementation Plan.

Underpinned by our vision, mission and values; this strategy highlights and supports our guarantee to promote equality throughout the planning and development of service commissioning; whilst appreciating and respecting the diversity of our local community and staff.

This strategy will support our commitment to give everyone in the community the opportunity to be heard and give their opinions about local healthcare services. It will also allow us to continue to have open, honest and two-way conversations – at times and in ways that are appropriate for our stakeholders.

Dr Mark Hayes  
Chief Clinical Officer

Rachel Potts  
Chief Operating Officer

## 2 Accessibility

---

**This document contains information about how we will meet our equality duties. If you need this information in another format or language, please phone: 01904 555870 or email [valeofyork.contactus@nhs.net](mailto:valeofyork.contactus@nhs.net)**

Ten dokument zawiera informacje o tym, jak będziemy spełniać nasze obowiązki na rzecz równości. Jeśli informacje te są potrzebne w innym formacie lub języku, prosimy o telefon: 01904 555870 lub email [valeofyork.contactus@nhs.net](mailto:valeofyork.contactus@nhs.net).

An easy read version of this document will be available shortly, please contact us at: [valeofyork.contactus@nhs.net](mailto:valeofyork.contactus@nhs.net) for more details

## 3 Introduction

---

This Equality, Diversity and Human Rights Strategy will set out how Vale of York Clinical Commissioning Group (CCG) will meet its public sector equality duties under the Equality Act 2010. It will describe:

- The definitions we use for equality, diversity and human rights
- Why we have developed this strategy
- Our understanding of our legal duties
- How we apply these duties in the context of our organisation
- Our understanding of the population we commission services for, including a demographic breakdown of the population by protected characteristic and an overview of health inequalities faced by people who share protected characteristics
- Our approach to identifying our equality objectives, including the use of the Equality Delivery System
- Our equality objectives and implementation plan
- How we will work with partners, patients and communities and other stakeholders such as HealthWatch to ensure that our equality objectives and approach are sound and to be accountable for performing against these objectives
- How we will monitor and report back on our performance

## 4 Definitions

---

**Equality** is ensuring individuals or groups of individuals are treated fairly and equally and no less favourably, specific to their needs. It may also mean treating people more favourably based on their needs (making services more accessible for people with disabilities).

**Diversity** aims to recognise, respect and value people's differences to contribute and realise their full potential by promoting an inclusive culture for all.

**Inclusiveness** describes how people from all backgrounds are involved in an organisation, how their perspectives are valued, and how their needs are understood.

**Human Rights** are the basic rights that people are entitled to. These are broadly captured by the FREDA principles:

**F**airness, **R**espect, **E**quality, **D**ignity, **A**utonomy

## 5 Why have we developed this strategy?

---

We know that we have a public sector duty under the Equality Act 2010 to promote equality and eliminate discrimination and foster good relations. We also understand that equality is a core principle of the NHS Constitution and embedded into the Health and Social Care Act. Attachment 1 provides the detail of our duties.

We understand that the spirit of these duties is to improve our understanding of the population we commission services for, listen to the people who use the services we commission, work in partnership with community groups, local authorities, HealthWatch and providers of healthcare so that together we can make services accessible and appropriate and that all patients have the best information possible about managing their health. Developing this strategy helps us to review where we are now, develop stronger relationships with our partners, patients and communities, identify our objectives and make sure that we deliver.

We know we cannot achieve this without the commitment of our staff and this strategy also provides an opportunity for us to make sure we are an inclusive employer, with well-supported, engaged and empowered staff.

## 6 About Us

---

The CCG's Integrated Operational Plan 2014-19 sets out our function, our vision, mission and values and information about our governance structure. This document is available online at: <http://www.valeofyorkccg.nhs.uk/publications/5-year-plan/> or telephone 01904 555870 if you do not have internet access.

Reducing health inequalities is one of our strategic objectives and being an inclusive organisation is reflected in our values.

### 6.1 Our staff

As a CCG, we only directly employ 63 staff. We are committed to attracting, retaining and developing a diverse and skilled workforce. We routinely collect equality data for our workforce which is submitted to NHS Employers.

We actively work to remove any discriminatory practices in our work, eliminate all forms of harassment and promote equality of opportunity in our recruitment, training, performance management and development practices.

Policies and processes in place to support this include:

- The Performance Development Review Policy
- Induction Policy
- Bullying and Harassment Policy
- NHS Code of Conduct for Managers
- Job descriptions (including statements regarding equality and diversity expectations)
- Annual appraisals with staff

We also routinely provide Equality and Diversity training which is mandatory for all our staff. Enhanced training is available, as appropriate to individual staff roles.

## 6.2 Our Population

The Joint Strategic Needs Assessment (JSNA) provides is our primary source of data about the population we serve. We refer to the York JSNA (online at [www.healthyyork.org](http://www.healthyyork.org)) as well as the North Yorkshire JSNA 2012 reports, as our registered patient population of 332,665 extends beyond the city of York to include Selby, Easingwold, Pocklington and parts of Ryedale.

Area	Population size
City of York	198,051
Selby	83,500
Easingwold	14,546
Pocklington	8,337
Ryedale	51,700

The CCG receives a monthly Public Health Report; however we do recognise the challenge of understanding the needs of all of our population, as this is not co-terminous with local authorities. We work with Public Health to improve the quality of data we receive for the Vale of York population.

City of York Council refers to communities of identity, which include people who share protected characteristics based on evidence of particular inequalities:

*A Fairer York looks at broad themes of fairness. However, we know that inequality can often be most strongly felt by some groups of residents in our community who are offered protection under the Equality Act 2010. This covers Age, Disability, Gender Reassignment, Marriage and Civil Partnership, Pregnancy and Maternity, Race, Religion and Belief, Sex and Sexual Orientation.*

*The Equalities Act 2010 makes it unlawful to discriminate and treat people unfairly on the basis of these characteristics. In York, when we talk about people with protected characteristics we refer to our "Communities of Identity". Other groups included in our communities of identity are Carers and Vulnerable People. We define vulnerable people are those living in the lowest income groups; they are more likely to suffer inequalities in many aspects of life such as health, education, financial security and personal safety, and may need additional support to address this.*

A detailed analysis of our population by protected characteristic is given in Attachment 2 – Population and Health Inequalities Data. This includes an overview of health inequalities associated protected characteristics.

The protected characteristics defined in the Equality Act 2010 are:

- Age
- Disability
- Gender Reassignment
- Marriage and Civil Partnership
- Pregnancy and Maternity
- Race (including nationality)
- Religion or Belief
- Sex

- Sexual Orientation

The CCG has also identified 'rurality' as another factor that needs to be considered, due to the isolation through lack of transport links experienced in some rural parts of the patch.

## 7 Our Approach to Promoting Equality

---

### 7.1 Leadership and Governance

The Governing Body accountability for Equality and Diversity sits with the Chair of the CCG. The Chief Operating Officer is the Executive Lead for Equality, with the Head of Integrated Governance as the Corporate Lead and the Chief Nurse as the Clinical Lead. Our leadership approach will ensure that there is fairness in our commissioning decisions and that business is planned and conducted to meet our equality duties.

Our Quality and Finance Committee will monitor our performance against our equality objectives, with annual reporting to the Governing Body. We consider publishing equalities monitoring data for our governing body.

### 7.2 NHS Equality Delivery System

We have used the Equality Delivery System (EDS) in the development of this strategy to provide us with a baseline assessment. The assessment was done as workshop with a cross section of staff to help provide an initial impression of where the strengths and areas for development are. A refreshed EDS – known as EDS2 – was made available in November 2013. The main purpose of the EDS2 was, and remains, to help local NHS organisations in discussion with local partners, including local populations, review and improve their performance for people with characteristics protected by the Equality Act 2010.

An overview of the EDS as well as the assessment outcomes for stage 1 of our assessment is given at Appendix 2.



## 7.3 Equality Impact Analysis

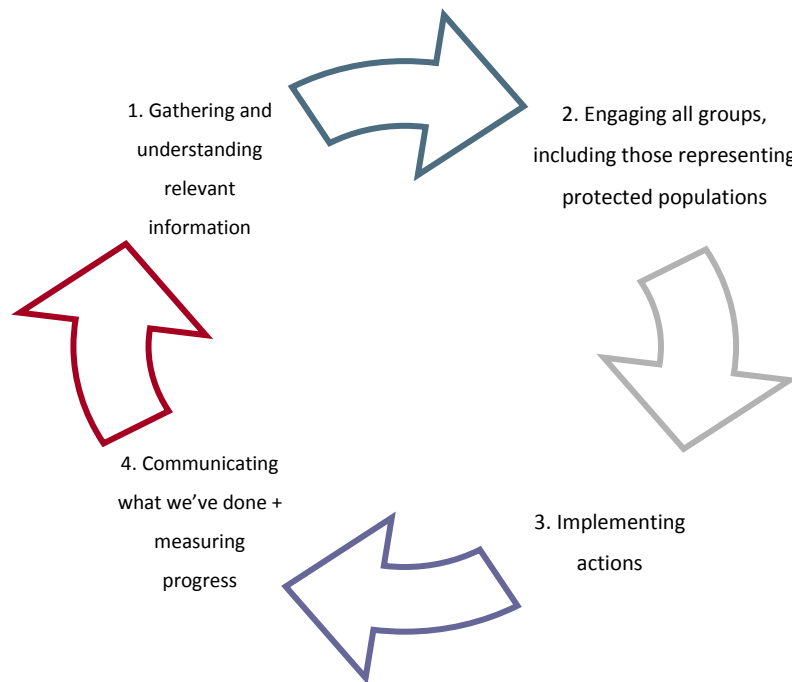
Equality impact analysis means thinking about how people with particular characteristics may be affected (either positively or negatively) by the decisions we make. Equality analysis should be embedded as part of normal business processes. This includes our approach as an employer and as a commissioner of health services. Thinking about equality impact should be a natural part of the thought process in making decisions, rather than a bolt-on process.

### 7.3.1 As a Commissioner

The role of the CCG is primarily to commission health services, so we will need to think about how people from the protected groups may be affected for each step of the commissioning cycle:

- When we decide our strategy and priorities
- When we re-design services
- When we plan how we will shape supply and manage demand
- When we procure services from providers
- When we decide how we will monitor and evaluate performance

In each of these circumstances, we will look to analyse relevant information and understand views from communities themselves. We will then consider and implement appropriate actions to make sure no groups are unfairly disadvantaged, and monitor the effectiveness of what we've done. This is shown in the cycle below:



In order to stimulate and demonstrate our thought processes, for each of the circumstances outlined on the previous page, we will write down answers to:

1. *How might this affect people from the protected groups in different ways to others?*
2. *What information and engagement with communities have you used to make this judgement?*
3. *What are you going to do to remove or minimise any disadvantage?*

### **7.3.2 As an Employer**

We recognise the need to pay due regard to equality in the decisions we make as an employer. All our policies include an equality impact analysis, which shows how we have considered the impact of our policies on our staff.

### **7.3.3 Making sure it happens**

To make sure we have the capacity to do effective equality analysis we have developed and implemented tools and guidance for use by staff to help with their analysis. Specific training has been provided to our staff so that they are able to do this effectively and to our Governing Body so that they understand their role in seeking assurance that an effective

equality analysis has been undertaken. All papers that go before the Governing Body must include an equality impact analysis and Governing Body members understand that it is the substance of the analysis that is important rather than just the completing the paperwork.

Equality analysis supporting Business Cases for commissioning decisions is included in consultation material so that equality issues raised in consultations can be noted and fed back into the decision making process.

*Equality Impact Analysis of policies is available via this link:*

[www.valeofyorkccg.nhs.uk/publications/policies/](http://www.valeofyorkccg.nhs.uk/publications/policies/)

*Our equality analysis tools are included in Attachment 5.*

## **7.4 Communications and Engagement**

NHS Vale of York CCG have established two key mechanisms for facilitating engagement with patients and the public:

Public & Patient Engagement Steering Group monitors and oversees engagement and provides guidance to CCG on appropriate and effective use of engagement methods.

Public & Patient Forum is open to the public, stakeholder and patient reference groups and held twice a year. It receives reports from the Steering Group on work being undertaken by CCG, as well as being encouraged to contribute to discussions on CCG activities. Our consultation database can be joined by all members of the public and links to community groups by prior agreement.

We are committed to transparency and openness and recognise that individual members of the public and sections of the community may experience barriers in accessing information and services. Our Engagement Strategy encourages the use of a wide range of communication methods to promote access to information and will ensure the engagement process is open and accessible to all. The Strategy sets out how we will establish mechanisms for:

- Engaging with, and listening to, patients, carers, diverse groups and other stakeholders

- Having a means of ensuring that patients' experiences are taken into account when commissioning decisions are made.
- Communicating with stakeholders to ensure that people are kept informed of developments and have access to information they need, when they need it.
- Engaging with the public on our equality objectives and held to account on our performance
- Working closely with our council partners to ensure we reach all stakeholder groups

We are committed to fully involving all sections of the community in the development of our objectives and associated action plans. We will continue to strive to give every opportunity to our key stakeholders to comment on health services in Vale of York to inform priorities for action. This includes:

- Finding out what barriers people face and taking steps to remove them.
- Asking if people are satisfied with health services e.g. through surveys, focus groups.
- Setting priorities and planning changes.
- Monitoring and reviewing current data and provision.
- Reviewing and revising this plan.
- Providing feedback on how people's views have influenced our decisions and actions.

One of our equality objectives is to maximise engagement in our equality impact analysis to ensure that the services we commission are inclusive, accessible and appropriate.

A recent engagement survey highlighted issues with a particular relevance to equality and access (see Engagement Involvement Report NHS VoY CCG). These findings will inform equality analysis and have been incorporated into our Equality Needs Assessment Tool

#### **7.4.1 Engagement on our equality objectives**

We were legally required to have identified our equality objectives by 13 October 2013. We have used the results of previous engagement findings and internal assessment (using the Equality Delivery System) to identify our objectives, which are now expressed as part of

EDS2, the second iteration of the Equality Delivery System. The equality objectives that form part of EDS2 are set out in paragraph 8 below.

A list of stakeholders is given below. If you would like to be included in this list please contact: ☎01904 555870, email: [valeofyork.contactus@nhs.net](mailto:valeofyork.contactus@nhs.net)

- Patient and Public Engagement Forum
- Patient and Public Engagement Steering Group
- City Of York Council + the Equality Advisory Group
- HealthWatch York
- York Teaching Hospitals NHS Foundation Trust
- Tees, Esk and Wear Valleys NHS Foundation Trust
- York Health and Wellbeing Board
- North Yorkshire County Council Health and Wellbeing Board

## 7.5 Partnerships

The CCG recognises the importance of working in partnership to promote equality. This means providing leadership and also making the most of existing forums, such as the Equality Advisory Group hosted by City of York Council.

The CCG is a member of the following Health and Wellbeing Boards:

- North Yorkshire
- City of York
- East Riding

The CCG will work together with the Health and Wellbeing Boards to reduce health inequalities and collaborate where possible on delivering shared equality objectives.

We also work in partnership with our providers and other health organisations to identify shared objectives relating to equality data, access and engagement. These will be reflected in performance and quality indicators managed through the contracting process.

See Figure 2 - Defining shared equality objectives

## 7.6 Publishing Information

We are committed to publishing a range of equality information to help our local residents gain a greater understanding of the decisions we are making and why they are being taken. In line with good practice, we will aim to ensure our published equality information:

- Is available online and up-to-date.
- Is easy to find, clearly linked together and (ideally) available in one place.
- Covers both potential and actual service users.
- Provides information on the core functions of the organisation.
- Includes evidence on how equality impact is assessed, particularly with regard to the most relevant functions and policies.
- Is accessible to everyone and available in relevant alternative formats and languages, where required.

We will undertake a review of our published information at least annually.

## 8 Our Equality Objectives

---

The development of our equality objectives have been formulated through the self-assessment of our EDS and the initial engagement work we have already undertaken to develop our commissioning priorities. .

Our equality objectives are:

1. To provide accessible and appropriate information to meet a wide range of communication styles and needs
2. To improve the reporting and use of equality data to inform equality analyses
3. To strengthen stakeholder engagement and partnership working
4. To be a great employer with a diverse, engaged and well supported workforce
5. Ensure our leadership is inclusive and effective at promoting equality

Our implementation plan shows how we will realise and measure these objectives. The table and figure below shows how we will seek to collaborate with others to achieve these objectives. Please contact the Head of **Strategy and Governance** if you would like further information (contact ☎01904 555870, email: [valeofyork.contactus@nhs.net](mailto:valeofyork.contactus@nhs.net) ).

Integrating Equality Objectives		
<b>Define common objectives with Local Area Office</b>	Link to GP	
	Access and uptake (RSS)	
<b>Define common objectives with Healthwatch</b>	Engagement	
	Accessible Comms	
	Equality data & insight	
	Access to services	
<b>Define common objectives with providers</b>	Safety/access/ experience	
	Get baseline across providers	
	Agree review process	
<b>Define objectives relating to business intelligence</b>	Need better info	
<b>Health and Wellbeing Board</b>	Accessible communications	
	Engagement	
	Evidence of inequalities	
<b>Define common objectives with local authority</b>	City of York Council	Engagement
	North Yorkshire CC	
<b>Define common objectives with Public Health</b>	Better population data	
<b>Define staff objectives</b>	Support from CSU	

Table 1 - Defining shared equality objectives

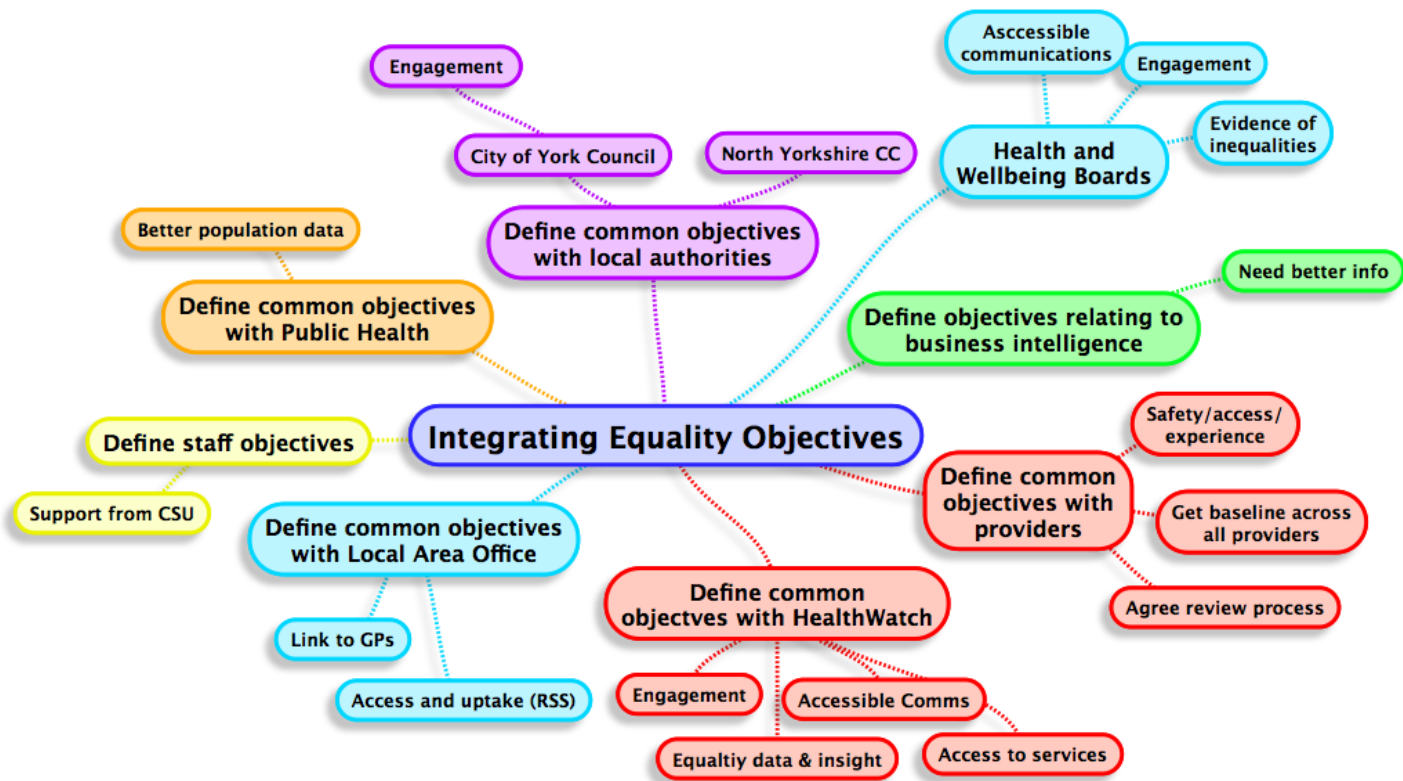


Figure 2 - Defining shared equality objectives

## 8.1 Monitoring and Review

The **Quality and Finance Committee** will monitor on a quarterly basis the delivery of our Equality Objectives and action plan, providing an annual progress report to the Governing Body and the public, ensuring it is made available in accessible formats.

The **Quality and Finance Committee** will oversee and challenge our approach to engagement activities to ensure our work is inclusive of the population we serve.

The **Quality and Finance Committee** will also ensure that relevant information is published in accordance with the Specific Duties of the Equality Act 2010.

We will review our equality objectives bi-annually.



## 9 References

---

Title	Weblink
1. City of York Health and Wellbeing Strategy, 2013 – 2016	<a href="https://www.york.gov.uk/downloads/file/858/joint_health_and_wellbeing_strategy">https://www.york.gov.uk/downloads/file/858/joint_health_and_wellbeing_strategy</a>
2. Health and Wellbeing in York, Joint Strategic Needs Assessment	<a href="http://www.healthyyork.org">http://www.healthyyork.org</a>
3. North Yorkshire JSNA 2014	<a href="http://www.nypartnerships.org.uk/index.aspx?articleid=26753">http://www.nypartnerships.org.uk/index.aspx?articleid=26753</a>
4. Vale of York 5-year Plan	<a href="http://www.valeofyorkccg.nhs.uk/publications/5-year-plan/">http://www.valeofyorkccg.nhs.uk/publications/5-year-plan/</a>
5. NYCC JSNA Summary for NHS Vale of York CCG:	<a href="http://www.nypartnerships.org.uk/CHttpHandler.ashx?id=30659&amp;p=0">http://www.nypartnerships.org.uk/CHttpHandler.ashx?id=30659&amp;p=0</a>
6. City of York Local Account for Adult Social Care 2014	<a href="https://www.york.gov.uk/info/20124/adults_social_care/1458/adult_social_care_local_account">https://www.york.gov.uk/info/20124/adults_social_care/1458/adult_social_care_local_account</a>
7. Vale of York Public Health Report, 2015	<a href="https://www.york.gov.uk/info/20125/health_and_wellbeing/957/director_of_public_healths_annual_report_2015">https://www.york.gov.uk/info/20125/health_and_wellbeing/957/director_of_public_healths_annual_report_2015</a>
8. The York Gypsy, Roma and Traveller Strategy , 2013- 2018	<a href="https://www.york.gov.uk/info/20095/housing_plans_and_strategies/1649/gypsy_roma_and_traveller_strategy_2013_-2018">https://www.york.gov.uk/info/20095/housing_plans_and_strategies/1649/gypsy_roma_and_traveller_strategy_2013_-2018</a>
9. Topic Summaries Lesbian, Gay, Bisexual and Transgender communities	<a href="http://www.northyorks.gov.uk/CHttpHandler.ashx?id=18942&amp;p=0">http://www.northyorks.gov.uk/CHttpHandler.ashx?id=18942&amp;p=0</a>
10. Prescription for Change: Lesbian and bisexual women's health check 2008	<a href="http://www.healthylives.stonewall.org.uk/lgb-health/lesbian-and-bisexual-women/#findings">http://www.healthylives.stonewall.org.uk/lgb-health/lesbian-and-bisexual-women/#findings</a>

11. Mapping rapidly changing minority ethnic populations: a case study of York by the Joseph Rowntree Foundation <https://www.jrf.org.uk/report/mapping-rapidly-changing-minority-ethnic-populations-case-study-york>
12. Health Profile of Selby 2015 <http://www.google.co.uk/url?sa=t&rct=j&q=&esrc=s&frm=1&source=web&cd=2&ved=0CCYQFjABahUKEwi0-q3z3bzIAhWJbD4KHT2EAPw&url=http%3A%2F%2Fwww.apho.org.uk%2Fresource%2Fview.aspx%3FRID%3D171690&u sg=AFQjCNGtZMjs4xcjZ-7-ETAE36iqbsXXeQ&bvm=bv.104819420,d.d2s>
13. Selby Migration Profile 2012 <http://www.migrationyorkshire.org.uk/userfiles/attachments/pages/609/selby-lmpsummary-nov2012.pdf>
14. HealthWatch York – “Access to health and social care services for Deaf people” (Draft – November 2013) <http://www.healthwatchyork.co.uk/our-work/hw-york-publications/>
15. Migration profile for Leeds City Region (includes York) June 2015 <http://www.migrationyorkshire.org.uk/?page=localmigrationprofiles>