

South Lincolnshire Clinical Commissioning Group

Equality Objectives Update
October 2015

South Lincolnshire Clinical Commissioning Group (SLCCG) set the following objectives in October 2013 and has made progress towards achieving them as outlined below and in the previous updates published on the CCG's website.

This report details a final update on the progress made towards these objectives. South Lincolnshire CCG will be publishing new objectives for the 2015 -17 period on its website before the end of October 2015. Further updates on the progress made towards these new objectives will then be published on the website.

Working on the baseline provided by the 2011 Census data, the CCG has built an understanding of the population it serves and uses this in carrying out Equality Analysis prior to any decisions it makes. The CCG will then have Due Regard to any identified issues and the health inequalities that exist.

Objective 1: Embed equality monitoring into provider contracts

SLCCG are the lead commissioner for three contracts, namely Peterborough and Stamford NHS Foundation Trust (PSHFT), Ramsay and Holbeach. The following table below provides an overview of what is built into each contract, which is managed through Quarterly Review Meetings:

Area of Interest	Indicator Description	Threshold	Method of Measurement	Consequence of Breach
Equality	<p>Equality, Inclusion and Human Rights.</p> <p>The Provider is required to demonstrate compliance with the Equality Act 2010 (and associated Public Sector Equality Duty) and the Human Rights Act 1998.</p> <p>This includes:</p> <ul style="list-style-type: none"> - The development of an Equality, Inclusion and Human Rights Action Plan - Monitoring of patients by Protected Characteristic* - Evidence of carrying out Equality Analysis to demonstrate Due Regard to the Public Sector Equality - Duty to promote equality of opportunity, eliminate discrimination and promote good relations between groups of people who have a protected characteristic and those who do not - 	<p>Written evidence of implementation of:</p> <ul style="list-style-type: none"> - equality, inclusion and human rights policies - strategies/plans (plan with red, amber green rating of progress graded by internal and external stakeholder groups; this can be your NHS Equality Delivery System) - Named equality, inclusion and human rights champion/s. - Appropriate governance arrangements to monitor the implementation of agreed equality objectives - Type of E&D training programme and attendance records 	<ul style="list-style-type: none"> - Annual review of issues within quality, contracting, review sessions. - To publish equality analyses and progress on action plans. - Quarter 1 to review EHR plans. 	<p>As per GC9 of the General Conditions Section of the 15 16 NHS standard contract.</p> <p>Where progress has not or is unlikely to meet the Equality, Inclusion and Human Rights requirements, this must be addressed and an agreement reached between the Commissioner and Provider on how and when it will be resolved.</p>

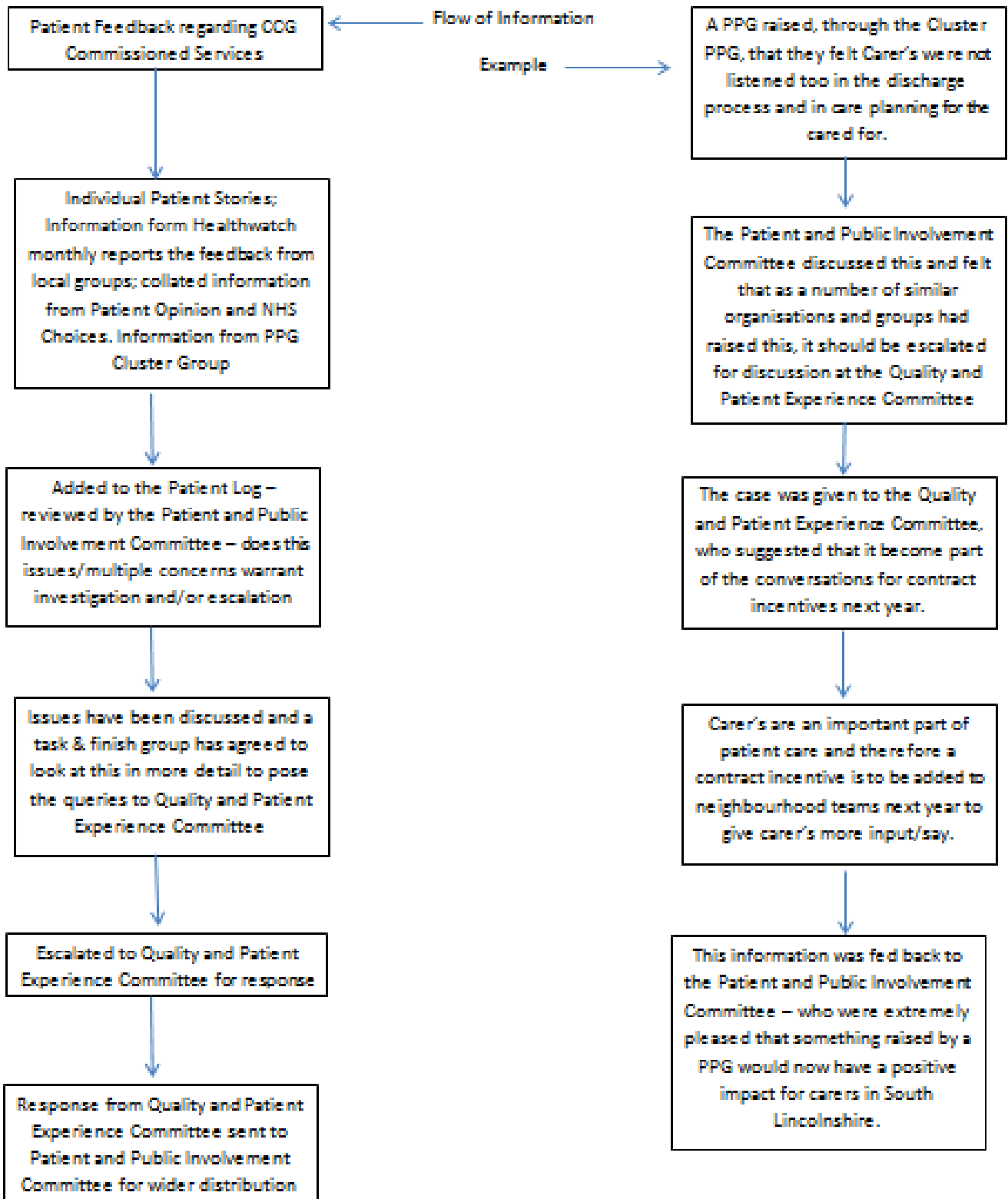
	<p>* Protected characteristics</p> <ul style="list-style-type: none"> •age •race •sex •gender reassignment status •disability •religion or belief •sexual orientation •marriage and civil partnership status •pregnancy and maternity <p>Take up by above protected characteristics to be reported at service/ward level</p>	<ul style="list-style-type: none"> - Patient monitoring data including findings and actions to be taken as a result - Equality Analysis information (number undertaken and outcomes) 	<ul style="list-style-type: none"> - Quarter 2 assess impact of plans on delivery and through annual report. <p>The report must detail which internal and external stakeholder groups have been engaged to review/grade progress on objectives</p>	
--	---	--	---	--

Objective 2: Develop new patient participation groups (PPG) and make use of existing ones in a coordinated way and support patient participation by equality area.

All 15 practices within SLCCG have a PPG, all with different levels of experience and different ways of working. Some are charitable organisations, some work towards fundraising and patient involvement and some are entirely virtual. In order to work with these groups in an established manner the CCG has invested resource into meeting with PPG Chairs and representatives and building a relationship that supports with 2 way flows of information and works towards ensuring patients are in a position to be involved in service change/redesign and to raise concerns and receive a response to this.

To achieve this, the CCG has worked the PPG Chairs and Vice Chairs to create a PPG Cluster Group that meets quarterly to discuss local level practice issues, such as DNA and local facilities and support one another to help resolve them. This group also meets to discuss wider issues (such as transport, general health and wellbeing) to coordinate solutions and patient education that is consistent and available to all practice populations.

Additionally to this the Cluster has 2 voting representatives on the Patient and Participation Involvement Committee (PPIC) which act as a conduit between the Practice PPGs and the PPIC, to bring queries/concerns/solutions to the table and to feedback to the Cluster, in order to ensure their individual PPGs/Practices know. Patient experience is also gathered from all arenas (including patient opinion & NHS Choices) and is collated monthly and logged to identify trends and to support with areas that involve more investigation. This log is used at Senior Management Team meetings and supports the wider intelligence gathering for the PPIC. An example of this is as follows:



Objective 3: Monitor complaints and comments to ensure that all sectors of the community have their say.

The complaints service that is provided for the CCG is governed by statutory legislation (the Local Authority Social Services and National Health Service Complaints (England) Regulations 2009). All staff working within the Complaints and Customer Care Team are Band 4 or above; with one of the core competencies as identified within ASPIRE as 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 for this area. All complaints are handled by following due process and in an individual manner. There is however no process that allows us to separate out complaints from protected groups - they are all dealt with in the same manner.

All complaints are handled as follows:

- 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 individual management plan is agreed with each complainant; this includes a timeframe for responding, allowing for appropriate and full investigation to be undertaken
- 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.
- Complaint investigation outcomes can also be provided to complainants at a face to face meeting
- Each contact received is reviewed and assessed on an individual basis
 - Management plans are agreed with complainants on a case by case basis
- Staff are experienced in assessing and understanding individual requirements and tailor individual management plans according to the overall needs of the individual needs
- Working with some of the CCG Customers in the further development of CCG complaints information that will be available in various formats and will include complaints information for vulnerable children and adults and how they can make a complaint.

In order to be more proactive and to encourage users of NHS services to feel confident to complain where appropriate, Arden&GEM are in the process of developing leaflets which will ensure that users know they have the right to complain and explain the complaints process. These leaflets will be available in different languages and in Braille and in large print. Details of how to complain are also available on the SLCCG website.

SLCCG receive a quarterly report which does not currently include E & I monitoring. The manager has been asked to include this information in reports going forward. In discussions with the complaints manager, we have also identified the need to analyse complaints and comments to see which hard to reach sections of the population are not responding and then consider how best to engage with them if this is demonstrated to be necessary.

Our Quality and Patience Experience Committee (QPEC) receives a report from Healthwatch which contains information on comments and complaints received by Healthwatch.

Objective 4: Develop specific project work to address issues highlighted in the Joint Strategic Needs Assessment e.g. a project in Welland supporting older adults and in South Holland to work with new arrival communities.

There are 35 key areas within the JSNA and the CCG is a committed member of the Health and Wellbeing Board, additionally to this the CCG is involved at District level to work on the operational elements of the objectives and to support with gap analysis and project development.

Some examples of areas that we have undertaken work with patients and the local population are as such (full information can be found within the annual report):

Commissioning Intentions Engagement

Summer 2014 First phase - 411 patients and members of the public (in total) were spoken with about last years' priorities and how they felt about these. The CCG had a stall on Spalding; Bourne and Stamford Markets in July 2014 and whilst at these events spoke to 217 individuals. Supported by GEMCSU we were able to have an interactive event with giveaways that promoted healthy living and keeping fit.

In addition to promoting the CCG and healthy lifestyles we advertised the priorities that the CCG has been working towards over the last 12 months and asked the public to comment on whether they thought they were still important and if they felt we needed to continue to work on them. If people felt that we were doing an area well and that is was effective we asked them to focus on the ones they felt needed further investigation.

The Stakeholder Event was held August – 44 stakeholders representing 34 organisations.

Diabetes

2 x consultation events were held (Welland and South Holland) to look diabetes services and self-management. 55 people attended and gave views on what's good/not good; what they would like to see delivered; what would help them self-manage better? Education and peer support were identified as key priorities for diabetic patients.

SLCCG have since taken the opportunity to work with the Patients in Control programme (funded through NHS England and being led by Kent CSU). This involves working with patients to understand what peer support and education should look like from their point of view.

SLCCG identified funding opportunities for this work (NHS E money, for a one year pilot) working in collaboration with health trainers to deliver 4 x events per year across our area regarding healthy eating, cooking and growing (of food) and exercise for diabetics and pre diabetic patients. This has been a resounding success so far, with tangible outcomes and evidence to support research work being undertaken by University of Nottingham to support with future work in this area.

A8 Community

Extensive engagement work has been carried out by the CCG by working in partnership with local employers with high proportion of migrant population employees. Three whole day events were held within Bakkavor to raise awareness of GP registration and the CCG worked in partnership with various agencies to deliver health checks and health promotion (including Phoenix stop smoking team and Early Prevention of Cancer Team). The event was a success as highlighted below:

235 people attended the event at Bakkavor Spalding
94.5% of people undertook a health check
9% of people undertook a TB questionnaire
10% of people registered with a SLCCG GP

Three further Bakkavor sites undertook the same programme in March 2015, also a success as shown below:

- Wingland Foods 36 people engaged and 26 health checks were carried out
- Bakkavor Meals 14 people engaged and 25 health checks were carried out
- Bakkavor Pizza 26 people engaged and 26 health checks were carried out
- Total of 76 people engaged at the event (overall)
- 14% of people have registered with a GP (overall)

A similar taster event took place at Morrison's factory (Spalding). Again the CCG worked in partnership with a variety of organisations to encourage staff to register with a GP, undertake a health check and offer signposting information. The event was a huge success as highlighted below:

- 78 people attended the event
- 22 people had a health check
- 34 people took a GP registration form
- Further events planned for 2015/2016

Working with Carers:

An area raised through the Patient and Public Involvement Committee showed that patients were concerned that carers were not always identified in hospital settings and then not listened to whilst the cared for was being treated, or at discharge. As a result we worked with Peterborough & Stamford Hospitals Foundation Trust and the Lincolnshire Carers and Young Carers Partnership to look at how carers could be identified and tracked through the system. As a result a CQUIN has been developed for 2015-16 with the Trust to support them to develop better relationships with carers.

Parity of Esteem:

Working with the Society in the Fens group, we have actively supported with work around depression and debt, and the impact of illegal money lending within the county, on people, families and their mental health. Co-ordinating a partnership with LPFT; Illegal Money Lending Team; Local Churches and third sector agencies such as CAB and Credit Unions – we have nominated (at the request of the Illegal Money Lending Team) the Fen Project for a National Award in this area.

Improving patient access and experience for Mental Health and Learning Disabilities

SLCCG has secured Cantab mobile, an app that is used in primary care to diagnose patients with dementia. Early diagnosis will enable patients and carers to proactively access support services and plan for future needs.

A car has been commissioned via EMAS. The car will respond to urgent calls received by the call centre for patients who have fallen but after assessment over the phone do not need hospital admission. The Car is staffed with a paramedic and Emergency Care Assistant who will attend the scene and provide a full assessment. They will also ensure that the patient is taken home or to a place of safety. If hospital attendance is needed the crew will call for an ambulance to convey the patient to hospital.

A Triage car is currently in the pilot phase, managed by EMAS the car is staffed by a Mental Health Nurse and a paramedic. The car responds to all urgent calls which do not require an A&E admission. Early results show good rates of both diversion and outcomes which do not result in use of police custody or admission to hospital. The Crisis Concordat Declaration has been written and signed up to by the main stakeholders. This is a whole community approach to mental health care.

Young People Health Education:

Working with primary school in South Holland, the School Council will learn how the website for NHS Digital Online Badges works and work towards these online badges by undertaking health related challenges. They will then teach this to their peers and showcase it to other schools in the area, the CCG are supporting with helping with the school to achieve events and support their school population.

The CCG works closely with partners to avoid duplication and enhance service access to patients and the public, and therefore this objective is ongoing, especially with the current JSNA consultation.

Objective 5: Support our staff by becoming a Mindful Employer and a Disability Symbol holder.

The CCG will continue to implement the action plan for Mindful Employer and Two Ticks during 2015 – 2017.

Future Plans

The CCG's proposed Equality Objectives for 2015 -17 build on the success of the previous two years' work and are detailed below:

Objective 1:

Continue to embed equality monitoring into provider contracts and work with providers to ensure that services commissioned are available to all patients with protected characteristics.

Objective 2:

Continue to work with Patient Participation Groups and other organisations such as Healthwatch to ensure that all sectors, including those with protected characteristics, report positive experiences of the NHS.

Objective 3:

Continue to monitor complaints and comments to ensure that all sectors have their say and encourage feedback on access and experience from health professionals as well as patients and carers.






Objective 4:

Develop specific project work to identify the views of carers on the health and social care needs of the person cared for and to develop an action plan which focuses on improving the health outcomes of both carer and cared for.

Objective 5:

The CCG will continue to implement the action plan for Mindful Employer and Two Ticks.

Appendices:

Appendix 1	 Diabetes Feedback Report Final August 2
Appendix 2	 REPORT Bakkavor Event March 2015 DR
Appendix 3	 REPORT Bakkavor Event.pdf
Appendix 4	 REPORT Morrisons Event.pdf
Appendix 5	 REPORT Public Engagement.pdf