

South Lincolnshire  
Clinical Commissioning Group

Annual Equality Report  
2014

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## **Introduction**

This Annual Equality report demonstrates how the CCG has embraced the equality, diversity and human rights agenda by embedding the ethos into everything we do to commission services that meet the needs of the local people of South Lincolnshire.

The report is a summary of how the CCG is working alongside the legislative requirements. Our legal responsibility under the Equality Act 2010 includes the general and specific duties covering age, sex, race, disability, sexual orientation, religion and belief, gender identity, marriage and civil partnerships and pregnancy and maternity – these are known as “protected characteristics”.

The report will draw your attention to the work undertaken in 2014 to ensure that we commission services in a way that makes them accessible to all, including the most vulnerable. We have also highlighted some key priorities for the next year.

Although the CCG is not sufficiently large to require workforce monitoring, we are actively working to ensure that our staff and Governing Body are as representative of the local community as they can be and have access to robust training and development with regard to equality, inclusion and human rights.

## **About South Lincolnshire CCG**

Across Lincolnshire there are four Clinical Commissioning Groups which work together to buy health services, not only for their area, but the whole of Lincolnshire.

The 15 practices that make up South Lincolnshire CCG are working together to improve the quality and delivery of health services for patients, and reduce health inequalities across the area.

The two localities - Welland and South Holland - cover a large part of South Lincolnshire. Their aim is to develop better solutions for the local population, providing patients better access to the healthcare services they need.

GPs practices in the south of Lincolnshire are working together to improve the quality and delivery of services for our patients and reduce health inequalities across the area.

The local economy is based upon agriculture and food production with 60% of the workforce employed in the creation, processing or distribution of food. The majority of the population can be described as active working age people.

The GP registered population is approximately 161,000; South Lincolnshire has a much higher proportion of older people than England, and a lower proportion of young people. Two of the fifteen practices in South Lincolnshire have a higher average deprivation score than England. Life Expectancy in South Lincolnshire is 79.3 years for males and 82.5 years for females, both are slightly higher than for England. The prevalence of diabetes, coronary heart disease, stroke and cancer is higher in South Lincolnshire than for England as a whole.

## Vision

Working in partnership with others we will make the most effective use of the resources we have available to achieve the best health outcomes for the people of South Lincolnshire.

## Mission

For the people of South Lincolnshire to live longer and healthier lives.

## Values

We will uphold the principles, values and rights set out in the NHS Constitution. In addition, the values underpinning the work of the CCG are:

**Quality:** We will ensure that quality is central to everything that the CCG does.

**Ambition:** We will seek to achieve the highest standards in commissioning and secure the best health outcomes that we can for the people of South Lincolnshire.

**Leadership:** We will act as leaders within the NHS and with others who contribute to improving the health of the people of South Lincolnshire.

**Respect, Fairness and Equality:** We will treat everyone equally, recognising and valuing diversity and ensuring everyone has the opportunity to fulfil their potential. We will treat patients, the public, our staff and others with respect and dignity.

**Honesty and Transparency:** We will be open, honest and transparent about the decisions we make, explaining and sharing our decisions with the people of South Lincolnshire.

**Listening and Learning:** We will listen to patients, local people, health professionals and others who support the CCG. We will learn from others within and beyond the NHS to inform our decisions and strategic plans.

**Efficiency:** We will spend public money wisely, ensuring efficiency and value for money.

## **Driving Forward the Equality Agenda**

In our second year of operation, we have made some real strides towards moving the equality agenda forward in South Lincolnshire. The programmes undertaken have been about ensuring a real cultural and behavioural change to the way we involve people in the commissioning decisions we make. This is about developing and incorporating the principles that make good business sense, without losing the essential reason for the CCG's existence, which is to ensure that care is available to those who need it most.

The CCG has made considerable progress in this area this year, including developing an Equality and Diversity Strategy and engaging on the content, setting equality objectives, developing and delivering a programme of equality and human rights training for staff and Governing Body members and considering an equality and diversity competency framework for staff and for Governing Body members.

We are determined to ensure that equality is interlaced into our commissioning plans; for this reason, we have undertaken Equality Impact Assessments on our new and reviewed services and have had our Equality Delivery System self-assessment and action plan externally scrutinised by the Equality Delivery System Governance Group, which is made up of service users, carers, patients, staff, union representatives and other stakeholders and partners.

### **Equality and Diversity Strategy**

The CCG Equality and Diversity Strategy has been approved by the Governing Body and the comprehensive involvement and engagement exercise helped us to confirm that our plans for driving the agenda forward fed into the bigger picture for the local community of Lincolnshire.

The Strategy and its associated action plan, outline the equality objectives focussing on how we aim to address the areas highlighted in our self-assessment of the 18 outcomes of the Equality Delivery System as well as additional attention on areas that were not prominent in the EDS to go over and above what is normally expected.

Furthermore, we are developing specific action plans for protected groups to ensure that we start to concentrate our energy where evidence demonstrates that some groups are disadvantaged when accessing services.

Key activities this year have been:

- Developing and planning equality and human rights training for staff and Governing Body members
- Ensuring that providers are required to monitor equality as part of their Information and Quality Schedule.
- Carrying out joint work with local Provider agencies and other statutory agencies to discover the health needs of new arrival communities from Eastern Europe and developing outreach work based on the findings of the review a copy of this report can be found in the appendices 2.
- Working with people with dementia and their families to develop a programme of awareness raising to support early diagnosis. Working with local GP Practices SLCCG are working towards the introduction of the CANTAB mobile app. More information around this project can be found in the appendices 3.

- Working with the general population to support hard to reach groups and those individuals who may not be accessing health services at the moment however still would like to have their say on the priorities for SLCCG. More information on this can be found in the appendices 4.
- To support with the creation of the Patient Participation Group Cluster Meeting, to give opportunities to local PPG Chairs to facilitate actual change on behalf of their patient population. Most recently a change to supporting Carers in secondary care has been included in provider contract negotiations as a Commissioning for Quality and Innovation (CQUIN) scheme as a direct result of patient voice. A flowchart of this information is available in the appendices 5.
- To introduce a CQUIN scheme with Peterborough and Stamford Hospitals to enhance the system of transition for adolescents (12-18 years) who are moving from Children's to Adult Services.
- Working with pre diabetics; those with type 1/2 and their families/carers within the South Lincolnshire area, to support with education and interactive skills to better self-manage and reduce hospital admissions. Education and skills to self-manage was the top response from patient engagement. More information about these events (and the equality impact assessment) can be found in the appendices 6. with education programmes running in 2015/16.

## **Equality Delivery System**

In recognition of the benefits that equality can offer, we have adopted the NHS equality standard called the Equality Delivery System (EDS). The EDS is a tool that assists the integration of equality as well as ensuring that commissioning plans meet the legal requirements under the Equality Act 2010 CQC Essential Standards.

An Equality Delivery System Governance Group has been set up and continues to grow and support the CCG in driving forward the agenda. The Governance Group is a joint initiative between local NHS organisations and provides a coordinated approach to helping the CCG to understand the barriers to healthcare and good health faced by the people of Lincolnshire. It has a critical role in providing systematic scrutiny and monitoring of the CCGs equality agenda.

Furthermore, our association with Healthwatch and the Health and Wellbeing Boards helps us to work in partnership to ensure that our priorities encompass the “bigger picture”.

Next Step: we will be using the Equality Delivery System (EDS2) as the base for meeting our moral and legal duties. The Governance Group will continue to play the advisor, scrutiny and support role and will grow and develop as new members join the group to help us to commission excellent services.

## **Public Sector Equality Duty**

We have agreed and implemented a two-stage Equality Analysis process to assess policies and functions relating to the design and commissioning of services.

These analyses assist us with our duty to show “due regard” to promoting equality of opportunity, eliminating discrimination and promoting good relations between groups.

As part of our continuing work we would look to carry out further equality analysis on our integrated plan. This is moving forward into our 2015/16 project plans.

Equality Analysis has been considered in our Governing Body processes, assessing everything we do, to minimise the potential negative impact on groups of people.

Equality Analysis has been undertaken on the following policies:

- Assertive In Reach Services Boston
- Assertive In Reach Services Peterborough and Stamford Hospital Foundation Trusts Accident & Emergency
- Assertive In Reach Services Peterborough and Stamford Hospital Foundation Trusts Ward
- Assertive In Reach Services Queen Elizabeth Hospital Accident & Emergency
- Any Qualified Provider
- Cardiology Queen Elizabeth Hospital
- Chronic Heart Disease
- Community Diabetes Service Review
- Chronic Obstructive Pulmonary Disease
- Dementia
- Dermatology
- Care Home Educator
- Independent Living Team
- Remote Monitoring
- Risk Stratification
- Stroke Prevention

## **Workforce**

We are a small employer; however, we are committed to supporting our staff and are becoming Disability Symbol holders and Mindful Employers to further demonstrate this commitment.

## **Conclusion**

We appreciate the value and the benefits that equality, diversity and human rights have for an organisation such as ours. Everything we do is assessed and amended to ensure that no individual is detrimentally affected by the commissioning decisions that we make.

The support and hard work that the staff have put in place to drive and deliver our work is second to none. At the forefront of our minds, has been how we ensure that service users, patients and carers receive the right healthcare that meets their individual needs. We have ensured that assessing our policies and practices (new and old) limits the negative impact that they could have on those who are protected under the Equality Act 2010 and those who are not.

We will build on our achievements so far, embedding and mainstreaming equality into everything we do and making a difference that changes culture and improves the lives of those individuals in our care.