

# **1** Accessibility Statement

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Glossary of terms and abbreviations	
AIS	Accessible Information Standard
CCG	Clinical Commissioning Group
EDS / EDS3	Equality Delivery System
EqIA	Equality Impact Assessment
LD	Learning & Development
SLT	Senior Leadership Team
WDES	Workforce Disability Equality Standard
WRES	Workforce Race Equality Standard



# 2 Introduction

The CCG believes passionately in fostering a fair and positive environment to maximise the experiences and contribution of all. It has therefore actively embraced its equality duties, rather than simply focus on legal compliance It has dedicated its efforts over the last twelve months to build on the progress made in 2018/19, and achieve meaningful outcomes for our staff, patients and all those we serve.

This equality information report demonstrates how NHS Hull Clinical Commissioning Group (CCG) is meeting its public sector equality duties and NHS England equality standards. The report goes beyond compliance, to reflect our equality programme of work. We recognise this will always be an on-going journey of development and improvement and we welcome feedback and views on how we are doing.

This report:

- Sets out our equality public sector duties and how we have responded to these.
- Demonstrates how we are paying due regard to NHS England Equality Standards, including the Workforce Race Equality Standard (WRES), the Workforce Disability Equality Standard (WDES), the Accessible Information Standard (AIS) and the Equality Delivery System (EDS).
- Describes our governance arrangements for delivering our equality objectives and reviewing performance.
- Highlights achievements and progress against our equality objectives for 2017 2021.
- Identifies areas where improvement or progress is still needed.
- Set out our priorities for 2020/2021.

# **3 Legal Context and Equality Objectives**

NHS Hull Clinical Commissioning Group is committed to promoting equality and eliminating discrimination as an employer, and in ensuring that the services we commission are accessible and inclusive. We recognise our duties under the Human Rights Act 1998 and the Equality Act 2010, including the Public Sector General Equality Duty to pay due regard to:

1. Eliminating unlawful discrimination, harassment and victimisation. This includes sexual harassment, direct and indirect discrimination on the grounds of a protected characteristic. The protected characteristics



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defined by the Equality Act are age,

disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, sex, and sexual orientation (further defined in 3.2 below).

- 2. Advancing equality of opportunity between people who share a protected characteristic and people who do not share it. This means:
  - Removing or minimising disadvantage experienced by people due to their personal characteristics
  - Meeting the needs of people with protected characteristics
  - Encouraging people with protected characteristics to participate in public life or in other activities where their participation is disproportionately low.
- 3. Fostering good relations between people who share a protected characteristic and people who do not share it, which means:
  - Tackling prejudice, with relevant information and reducing stigma
  - Promoting understanding between people who share a protected characteristic and others who do not.

Having due regard means considering the above in all the decision making, including:

- How the organisation acts as an employer
- Developing, reviewing and evaluating policies
- Designing, delivering and reviewing services
- Procuring and commissioning
- Providing equitable access to services.

The specific equality duties were updated by The Equality Act 2010 (Specific Duties and Public Authorities) Regulations 2017. These regulations introduced requirements for public bodies to publish information in relation to gender pay equality and the annual publishing of equality information.

#### 3.1 The specific duties are:

- 1. Gender pay gap reporting:
  - a. Applicable to all public bodies with 250 or more employees
  - b. Utilising data from 31st March 2017 to analyse and publish by 30th March 2018 and annually thereafter



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- c. Publish the information in a manner that is accessible to all its employees and to the public, for a period of at least three years beginning with the date of publication.
- 2. Publication of information demonstrating compliance with s149(1) Equality Act 2010:
  - a. Publication must include information relating to persons who share a relevant protected characteristic who are;

i. its employees (providing it employs 150 or more employees);

- ii. other persons affected by its policies or practices.
- b. Publish information not later than 30th March 2018.
- c. Subsequently at intervals of not greater than one year beginning with the date of last publication
- 3. Preparation and publication of one or more, specific and measurable, Equality Objectives;
  - a. Published not later than 30 March 2018 (aligning to any current Equality Objective commitments).
  - b. Subsequently at intervals of not greater than four years beginning with the date of last publication.

#### 3.2 Protected Characteristics

The protected characteristics referred to in the Act are:

- Age, which refers to a person of any age group
- **Disability**, including persons with a physical or mental impairment where the impairment has a substantial long-term adverse effect on that person's ability to carry out day-to-day activities
- Sex, refers to a man or a woman
- **Gender reassignment,** which refers to a person proposing to or has undergone a process in relation to physiological or other attributes of sex, with the aim of aligning gender identity
- **Pregnancy and maternity**, this includes protection from discrimination when someone is pregnant, or after they have given birth. It includes protection for breastfeeding mothers
- Race, including ethnic or national origins, colour or nationality



- Religion or belief, including a lack of religion or belief, and where belief includes any religious or philosophical belief
- Sexual orientation, meaning a person's sexual orientation towards persons of the same sex, persons of the opposite sex and persons of either sex
- **Marriage and civil partnership**, refers to marital or civil partnership status, but in terms of assessing equality impact, only has relevance when a policy or decision includes criteria related to a person's marital or civil partnership status.

# 4 NHS England Equality Standards

## 4.1 Equality Delivery System (EDS)

As set out in the section above, our equality objectives and outcomes were developed using the EDS as a framework to engage with local interest groups and listen to their experiences. More information about our approach and outcomes can be found here:

http://www.hullccg.nhs.uk/equality-delivery-system-eds2/.

## 4.2 Workforce Race Equality Standard (WRES)

The WRES requires organisations to demonstrate progress against a number of indicators of workforce equality, including a specific indicator to address the low levels of BME Board representation. We recognise our role in asking providers to report on their performance against the WRES framework from 1 July 2015, as well as paying due regard to the standard in its own workforce practices.

Paying due regard to WRES as an employer and a commissioner is reflected in our E&D Outcomes Framework.

## 4.3 Accessible Information Standard

Implementing the Accessible Information Standard has been incorporated into our equality objective 1.

Further information about the CCG's WRES, WDES, EDS & AIS reports can be found on the following link:

https://www.hullccg.nhs.uk/policies/equality-diversity-and-inclusion/



# **5** Governance and Management Arrangements

All our staff are aware that it is everybody's responsibility to promote equality, diversity and inclusion. This is reflected in our Equality and Diversity Policy, staff training and equality objectives aligned to Personal Development Reviews (PDRs).

In addition to this, the Associate Director of Corporate Affairs is our executive lead for equality. Our Equality & Diversity Action Plan is regularly reviewed by an Equality & Diversity Performance Review Group consisting of:

- Jason Stamp, Lay Member for Public and Patient Engagement / CCG Vice-chair
- Mike Napier, Associate Director of Corporate Affairs
- Sue Lee, Associate Director of Communications and Engagement
- Associate Director for Human Resources and Organisational
  Development
- Joy Dodson, Director of Integrated Commissioning
- Amanda Heenan, independent Equality & Diversity Consultant, Arc of Inclusion

The E&D Performance Review group meets quarterly to update and review progress against an E&D Outcomes Framework 2019/20. Bi-annual reports are presented to the Quality & Performance Committee, with annual reports going to our Board. The Board has annual Equality & Diversity development sessions.

# 6 **Reporting Information**

## 6.1 Gender Pay Gap Reporting

The CCG employs 95 staff, as at the end of December 2019, and therefore is not subject to this reporting duty. However, in accordance with good practice we do regularly analyse and report our workforce data, including pay band by gender. Salaries are reviewed by our Remuneration Committee, which follows national guidelines.

Another section of the CCG's Annual Report includes a salary and remuneration report, which details the pay and other benefits received by members of the CCG Board as well as a summary of the CCG's pay profile.



## 6.2 Workforce Reporting

As above, the workforce reporting duty applies to employers with more than 150 staff. However, we do capture and analyse data relating to the protected characteristics of staff and our Board.

Full details of the CCG analysis can be found in its Workforce Race Equality Standard (WRES), Workforce Disability Equality Standard (WDES) and Equality Delivery System (EDS) Report on the following link:

https://www.hullccg.nhs.uk/news-posts/27-09-2019/

In summary,

- According to ESR data, fewer than 5% of the CCG's workforce is identified as BME. The BME population of Hull (as defined above) is 6%. Specific numbers are not listed as they are so small as to potentially enable the identification of individuals.
- According to CCG 2018/19 recruitment information, white candidates (when expressed as a ratio of applications to shortlisting) have a slightly lower chance of being shortlisted when compared to BME (9.8% and 10.5% respectively). The relative likelihood of white staff being appointed from shortlisting when compared with BME is 0.93. That said, caution must be used in interpretation of this data as the very low numbers reported in some categories would challenge statistical validity.
- 7% of the CCG's Board is BME.

## 6.3 Information about people affected by the CCG

The CCG works with our partners and the people of Hull to commission services and improve the health of the people and communities of Hull. The CCG's programmes are based on evidence about the about the population, with a focus on health needs and inequalities. These include:

- People, communities and place our plan for Hull
- My city, My health, My care the future of GP services in Hull
- Delivering the Five year Forward View commissioning services for Hull
- Better care in Hull through integration with the local authority
- Delivering safe, high quality services



- Building relationships with communities
- Taking action on health inequalities and the local strategy for health and wellbeing

The CCG has also developed a health information resource to support staff and partners in undertaking effective equality impact analysis. This is a developing resource of equality related research, and information. See: <u>http://www.hullccg.nhs.uk/health-information-and-resources-3/</u>

## 6.4 Equality Objectives

Our equality objectives were developed through extensive engagement with staff and local interest groups primarily through implementing the Equality Delivery System (EDS2). Our EDS2 findings have also supported the development of specific outcomes and success measures. For more information about how we implement the EDS see: http://www.hullccg.nhs.uk/equality-delivery-system-eds2/

Our equality objectives for 2017- 2021 are:

- 1. Ensure patients and public have improved access to information and minimise communications barriers
- 2. To ensure, and provide evidence that, equality is consciously considered in all commissioning activities and ownership of this is part of everyone's day-to-day job
- 3. Recruit and maintain a well-supported, skilled workforce, which is representative of the population we serve
- 4. Ensure the that NHS Hull Clinical Commissioning Group is welcoming and inclusive to people from all backgrounds and with a range of access needs
- 5. To demonstrate leadership on equality and inclusion and be an active champion of equalities in partnership programmes or arrangements.

Our approach this year has been to target our focus to a set of outcomes, matched to our equality objectives. The outcomes often span across a number of objectives. A summary of progress against the equality objectives and outcomes is given below. Further detail, including specific examples of activity, is contained in the CCG's Equality & Diversity Action Plan 1.

#### 6.4.1 Summary of progress – the CCG as a Commissioner:

Engagement and Communication

• The CCG has further developed a diverse network of people and organisations actively engaging with the CCG and informing decision



making. This is reflected in the CCG's

engagement plan which has resulted in a range of engagement activities and events, some of which have been delivered in partnership with Hull City Council and other partners. This provides a strong foundation for engagement on EDS3 and identifying the CCGs next set of equality objectives.

- Equality interest groups are working collaboratively with the CCG to gather equality and inclusion insight to inform decision making. For example, an Equality Reference Group has been formed to raise equality and inclusion issues and provide feedback on specific areas of the CCGs work.
- The CCG is collaborating with other organisations through the health and social care sector, evidenced through a number of joint events and activities. As we work in a more integrated way, we champion equality and inclusion to ensure that good practice is spread.
- Insight from engagement is starting to inform commissioning decisions in a more systematic way, through the equality impact assessment process, and strengthened links with the CCG's engagement team.
- The Accessible Information Standard (AIS) is routinely referred to in equality impact assessments of service specifications, as a key requirement for service providers. Further work will take place in 2020 to raise awareness amongst patient and community groups about rights to accessible information for disabled patients.
- The CCG continues to ensure that meetings and events are accessible across a wide range of needs. This is under continuous review.

#### Areas for development

The CCG will be giving particular emphasis to the following communication and engagement aspects over the next twelve months:

- Further development of capacity of equality reference group to feedback on equality impact assessments
- Continue to develop EDS3 engagement plan
- Challenge commissioners to reflect engagement insights in equality impact assessments and service specifications
- Develop CCG capacity to collaborate through the NHS online collaboration platform
- Further engagement / challenge in joint provider forum.



#### Corporate Governance

- The CCG has continued to strengthen and embed robust equality impact assessment (EqIA) processes and quality assurance for corporate & HR policies as well as commissioning decisions & clinical policies. This includes regular review of assessments, assurance through the CCG's governance groups and regular training and coaching sessions for staff by an independent equality advisor.
- A joint impact assessment framework has been developed and adopted by the Humber Joint Commissioning Committee to ensure that joint policies and commissioning activity follows a robust EqIA process.
- Progress against the CCG's equality programme of work is reviewed twice yearly by the Quality and Performance Committee and reported annually to the Board. This report will be published on the CCG's website and offered in a range of formats to ensure accessibility.
- Progress on Accessible Information Standard.

#### Areas for development

The CCG will be given particular emphasis to the following corporate governance aspects in the next twelve months:

- Greater challenge to providers on AIS delivery (particular focus on GPs)
- Strengthening of the assurance of primary care equality impact assessments
- Working in partnership / challenge to providers on EDS
- More detailed review of provider WRES and WDES plans and performance

#### Commissioning

- The EqIA process and capacity for commissioning projects & clinical policies has been further strengthened and embedded. Specific focus in 2019/20 on review of clinical policies and associated EqIAs.
- The standard review framework ensures that contract monitoring of providers includes performance on equality outcomes, with a particular focus on NHS Equality Standards included in the standard contract.
- The CCG continues to fund the provision of interpretation and translations services to primary care. The CCG receives quarterly reports from the provider which include the number of face to face and telephone language requests provider, by language and practice area.



This provides valuable insight to the

CCG about language needs across practice areas. Customer satisfaction data is also provided to the CCG.

#### Areas for development

The CCG will focus on the following commissioning aspects in the next twelve months:

- Further strengthen links to engagement team to ensure that engagement insights are informing decision making
- Strengthen process to review follow up actions from EqIAs
- Review progress on clinical policy EqIAs
- More evidence of provider performance on E&D through contract monitoring process

#### 6.4.2 Summary of progress – the CCG as an Employer:

Objective 3: Recruit and maintain a well-supported, skilled workforce, which is representative of the population we serve. Regular workforce reports reviewed by the Senior Leadership Team (SLT).

The CCG currently has a relatively small number of vacancies and planned recruitment, however:

- Organisational capacity is being built through HR partnership working with recruitment managers to embed E&D good practice in all recruitment advertising. This includes planned recruitment and selection training.
- The recruitment process is as inclusive and accessible as possible, within national framework. This is assured through:
  - Review of recruitment and selection processes ensure that job adverts are appropriate, targeted and inclusive
  - Equal opportunity monitoring evidence reviews and vacancy / application data
- Positive action to actively promote job opportunities and troubleshoot application process (find out where people experience barriers and if any additional support needed). Linking into initiatives by local authority / other partners where possible. The CCG
  - Attends local recruitment events and link in with local schools / partner organisations to promote the CCG as an employer of choice



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- Has improved knowledge of the CCG and what the organisation does and how we fit into the NHS. Successful programme of work placements and work shadowing opportunities
- Staff wellbeing supported to encourage an inclusive workplace culture, through:
  - Continued work with the Health & Wellbeing Group and monitoring of the action plan to ensure relevant and targeted on E&D
  - Review of Action tracker progress monitoring, staff survey feedback
  - Strong links between Workforce Wellbeing Group and E&D objectives
  - Continued development of plans through Disability Confident and Mindful Employer
- The appraisal process capturing a wide range of examples of staff promoting / implementing the CCG's equality objectives.
- Staff have well developed E&D skills:
  - All staff undertake mandatory E&D training, as well as regular and targeted sessions provided by an independent equality advisor (mainly focused on equality impact assessment skills)
  - Successful completion of identified training / programmes. Wider attendance at educational events and record of CPD
  - Board development sessions
- Good practice and challenges shared with partner organisations: examples:
  - A shared impact assessment screening tool has been developed across the four Humber CCGs (Hull, North Lincolnshire, North East Lincolnshire and East Riding). Further peer review and sharing of good practice will strengthen the implementation of this.

#### Areas for development

Particular focus will be given to the following over the next twelve months for the CCG as an employer:

• Greater integration of E&D objectives / outcomes in OD plan



- Wider opportunities for equality and inclusions skills development in Learning and Development Plan
- Optimising opportunities to share challenges and good practice with partner organisations perhaps using EDS3 as a focus
- Improved guidance and support re matching E&D objectives to appraisal process
- Board development session, scheduled for October 2020

### 6.5 **Priorities for 2020/21**

The further equality priorities for the CCG for the next year include:

- Identifying equality objectives for 2021 & beyond
- Adapting to challenges and opportunities of working in a more integrated way
- Implementation of EDS3
- Continued review and strengthening of EqIA review, sign-off and assurance process

## 7 Have your say

If you have any feedback about this report, or wish to raise any concerns please contact us, using the contact information given in section 1, page 1 of this report.