



North East Hampshire and Farnham
Clinical Commissioning Group

Equality and Diversity Strategy and Action Plan 2018 to 2021



*To ensure the right care, at the right time,
in the right place for local people*

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Forward

This Equality and Diversity Strategy sets out North East Hampshire and Farnham Clinical Commissioning Group's (to be referred to in this report as the CCG) commitment to taking equality, diversity and Human Rights into account in everything it does. This is whether commissioning services, employing people, developing policies, communicating with or engaging local people in the work of the CCG.

This strategy builds on achievements since publication of the CCG's Equality and Diversity Strategy 2012. The CCG plans to tackle current health inequalities, promote equality and fairness and establish a culture of inclusiveness that will enable health services to meet the needs of the population served.

The CCG's Governing Body commits to monitoring progress and reporting regularly and openly on the developments in this strategy. Governing Body members acknowledge and accept their roles in supporting the strategy and will play their full part in making its aims a reality.

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North East Hampshire and Farnham CCG

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1. Introduction

1.1. The CCG is a clinically-led NHS organisation. The CCG is responsible for planning and buying (commissioning) health services for the people of Aldershot, Farnborough, Farnham, Fleet and Yateley.

1.2. The CCG recognises and values the diversity of the population served and equality is central to the CCG's work to commissioning modern, high quality health services for all.

1.3. This means that:

- The CCG will take account the diversity of the population served, and the potential barriers some people face when accessing health services and how the CCG can work to reduce these.
- The CCG will tackle health inequalities and ensure there are no barriers to health and wellbeing.
- The CCG will ensure our health providers also meet the legal requirements around equality and human rights.
- Members of the public have the right to expect the care and treatment they receive to be provided in an environment that is free from unlawful discrimination.
- CCG staff have the right to work in an environment that is free from discrimination, victimisation and harassment.

1.4. The CCG's work on equality and diversity is based on:

- Principles of the NHS Constitution¹
- Equality Act 2010 and the requirements of the Public Sector Equality Duty under that Act²
- Human Rights Act 1998³
- Health and Social Care Act 2012 requirements, to reduce health inequalities, promote patient involvement, involve and consult the public.⁴

1.5. This strategy:

- Sets out equality and diversity in terms of the context of the population served by the CCG and the workforce of the CCG
- Describes progress made by the CCG since publication of the Equality and Diversity Strategy since 2012
- What the CCG plans to achieve in terms of equality and diversity
- How the CCG will achieve that plan

¹ Department of Health (2013) The NHS Constitution: the NHS belongs to us all. March. HMSO London.

² HMSO (2010) Equality Act 2010. London.

³ HMSO (1998) Human Rights Act 1998. London.

⁴ HMSO (2012) Health and Social Care Act 2012. London.

⁵ Department of Health (2011) EDS2, *Making Sure Everyone Counts. A refreshed Equality Delivery System for the NHS.* London. November.



2. The Population Served by the CCG

2.1. The resident population served by the CCG is estimated to be 210,066. The population statistics for the CCG are compiled by the Public Health Analysts at Hampshire County Council. They include statistics relating to the population covered by the CCG that resides within Surrey.

2.2. Key statistics^{1,2}:

- Age:
 - 24.7% are aged 0-19
 - 54.5% are aged 20-64
 - 17.0% are aged 65 to 89
 - 2.3% are aged 90 and over
- Sex:
 - Almost an even split between males (49.1%) and females (50.9%)
 - Life expectancy: Men 79.9 years, women 83.2 years
- Ethnicity:
 - 85.9% White British
 - 4.4% White Other
 - 9.7% other ethnic group, 6.2% being Asian
 - 400 residents are estimated to be Gypsy/Irish Travellers
- Language:
 - 93.2% of people state that English is their main language
 - 3.0% Nepalese is the next most common main language
 - 3.3% of all households are shown to contain no individuals with English as a main language
- Religion:
 - 61.1% Christian
 - 1.1% Muslim
 - 1.9% Hindu
 - 1.8% Buddhist
 - 0.2% Sikh
 - 0.4% Other
 - 26.3% No religion
 - 7.2% Not stated

¹ Hampshire County Council Joint Strategic Needs Assessment 2017: North East Hampshire and Farnham CCG

² Hampshire County Council Factsheet: 2011 Census Equality & Diversity Profile North East Hampshire and Farnham CCG



- Marriage and Civil Partnership:
 - 53.4% of the CCG's adult population are married
 - 0.2% of the CCG's adult population is in a civil partnership
- Disability:
 - 87.1% of people state their daily activities are "not limited" by a long term illness or disability
 - 7.7% of people state their daily activities are "limited a little" by their disability
 - 5.2% of people state their daily activities are "limited a lot" by their disability
 - Self-defined general health: 86.7% of people report themselves as being either good or very good health with only 0.7% reporting very bad health



3. Tackling Health Inequalities

3.1. Health inequalities for the CCG relate to education, employment and isolation. Lifestyle risks to the CCG relate to smoking obesity alcohol, inactivity and poor diet¹.

3.2. The CCG works closely with the following organisations to tackle health inequalities:

- Hampshire County Council
- Surrey County Council
- Hart Borough Council
- Rushmoor Borough Council
- South West Surrey Borough Council
- Hampshire Healthwatch
- Local voluntary and community sector organisations

3.3. In 2017 the CCG began meeting with representatives from different marginalised communities. This was to better understand their specific health needs. It began in 2017 with the Gurkha community. It will continue with, for example, carers, local military families and the gypsy and traveller community. Meetings are held in an informal setting so that CCG staff and community members can learn from each other.

3.4. The Hampshire Health and Wellbeing Board provides an overarching strategic framework for this partnership working which also supports the ongoing updating of the Joint Strategic Needs Assessment for Hampshire.

3.5. Members of the Health and Wellbeing Board also sit on each CCG's governing board and sub-committees, including the Community Engagement Committee. This allows for their formal involvement in CCG planning and reporting procedures.

¹Hampshire County Council Joint Strategic Needs Assessment 2017: North East Hampshire and Farnham CCG



4. The CCG's Workforce

- 4.1. The NHS Electronic Staff Record (ESR) allows self-administration by each staff member to record their protected characteristics. Review of the staff profile form the ESR enables the CCG to identify areas of development in order to be inclusive and ensure no group is disadvantaged in their staff journey.
- 4.2. The CCG recognises that discrimination can sometimes occur because of the way an individual's characteristics combine. The CCG also recognises that circumstances can change and people may begin or cease to identify with certain characteristics. This may be an individual becoming disable or because of pregnancy and maternity.
- 4.3. Equality and diversity is included in essential training for staff and must be undertaken at least every three years. This training is undertaken online via ConsultOD. Training records are also kept up-to-date via ConsultOD.
- 4.4. Online training related to equality and diversity is also required every three years. This covers health, safety and wellbeing, safeguarding adults and safeguarding children. Face-to-face training sessions are arranged on an ad-hoc basis, for example on PREVENT. Training reminders are sent out via Team Brief and at annual appraisal between line managers and their staff.
- 4.5. Employees have the right not to be discriminated against at work. CCG working practices are governed by Human Resources Policies. These policies are available to staff via ConsultHR website and CCG All Staff electronic folders. They are as follows:
 - Concerns and Whistleblowing (incorporating harassment and bullying at work procedure and reasonable adjustments)
 - Leave and Flexible Working
 - Maternity, Paternity, Adoption Leave and Shared Parental leave and Pay
 - Organisational Change
 - Recruitment and Exit
 - Sickness Reporting



5. Progress 2012 to 2017

5.1. Compliance with the Public Sector Equality Duty (PSED)

The CCG uses a range of mechanisms to comply with the duty to have “due regard” to the three aims of the PSED. The three aims are to:

- Eliminate unlawful discrimination, harassment and victimisation
- Advance equality of opportunity between different groups
- Foster good relations between different groups.

5.2. NHS Workforce Race Equality Standard

The CCG measures its compliance against the NHS Workforce Race Equality Standard (WRES) indicators. In accordance with Data Protection Act requirements this information is not available in the public domain. However, actions are identified to improve CCG performance against WRES indicators.

5.3. NHS Accessible Information Standard

The CCG is implementing an action plan to ensure compliance as commissioners with the NHS Accessible Information Standard. Compliance by providers of NHS services is monitored via contract review.

The CCG has also worked with general practice members to support their compliance with the Standard. This has included a presentation at a GP TARGET event, guidance and an audit tool to assess individual practice compliance. Practice managers have been recommended to work with their Patient Participation Groups to audit current and future practice.

5.4. Equality Analysis

The CCG’s Equality and Quality Integrated Impact Assessment (E&QIA) provides a framework for systematic assessment against the impact of commissioning decisions, Quality Improvement and Performance plans, cost improvement schemes and business cases.

The purpose of the E&QIA process is to ensure equality, quality and safety considerations influence CCG decision-making processes. Papers reviewed by the Clinical Executive Committee are therefore include a completed E&QIA to provide assurance that cost improvement plans and service changes are not detrimental to the quality and safety of patient care and access to services.

The E&QIA procedure will be reviewed during 2018 as part of new partnership working arrangements with North Hampshire CCG and Fareham and Gosport and south Eastern Hampshire CCGs.



5.5. Patient Experience

The CCG's complaints policy was reviewed during 2017 as part of new partnership working arrangements with North Hampshire CCG and Fareham and Gosport and South Eastern Hampshire CCGs. This review included ensuring compliance with the current legislation and any impact that may arise from the introduction of the General Data Protection Regulation which will be effective from April 2018.

The policy sets out the CCG's commitment to the principles of equality and diversity and the aims of the Public Sector Equality Duty. It includes dedicated sections on the duty of Candour and the duty of every member of staff to be open and honest with patients, their families, carers and representatives. Support for staff involved in a complaint is described. The policy includes a full equality impact assessment.

Anonymous equalities monitoring of complainants is being introduced. A form will be sent out with the complaint acknowledgement letter. This will include an explanation of why this information is being sought.

5.6. Consulting and Engaging with Patients and Local People

The CCG's Engagement and Communications Strategy 2016-19 sets out its engagement objective to:

Strengthen and embed robust processes to engage and co-design with the local community, ensuring that their views and experiences directly influence priorities, plans and delivery.

To achieve this objective, the CCG has a detailed communications plan with the aim of providing clear, concise and timely communication so that patients, carers and the public are aware and understand the work of the CCG. This includes making information easily accessible, in a language that is easy to understand, is timely and relevant and available in alternative formats.

The CCG recognises the diversity of the population it serves and the potential barriers that individuals and communities face to access health services. A range of methods are used to engage with the different communities and include:

- Face-to-face meetings
- Online consultations
- Written communications including Braille, large print, Easy Read and different languages
- Audio records and online videos
- Social media.

The CCG produces newsletters for local people. Topics covered include news on available, developing services and seasonal advice. The newsletters are:

- Quarterly newsletters for local people, called "Your Health Matters".
- Happy, Health, at Home



- Local Partners and Stakeholders update

Patient and public views are gained via social media and they can get involved in the work of the CCG in a number of ways. These are:

- The Community Ambassador programme
- GP Patient participation Groups
- Attending Governing Body meetings held in public
- Public meetings and events on current projects.

5.7. NHS Equality Delivery System 2

The CCG is reviewing its assessment against the NHS Equality Delivery System. Information from staff feedback via the annual NHS national staff survey has been supplemented by an internal staff survey to inform the stakeholder assessment.

Engagement with patients and the public and voluntary and community sector partners will be undertaken in the first half of 2018. The information gained from the engagement will inform the development of equality objectives to take forward within the CCG and working with the population served.

5.8. NHS Providers – Equity of Access, Equality and Non-discrimination

Equality metrics are included in annual review of contracts with provider organisations from which the CCGs commission services on behalf of the populations served. These are monitored via monthly and quarterly reports from providers at monthly and quarterly contract review meetings. The main providers are:

- Frimley Health Foundation NHS Trust
- Sussex Partnership Foundation Trust
- Surrey and Borders Partnership NHS Trust
- Spire Clare Park
- Virgin Care

The CCG also liaises with partner CCGs who lead on contracts with other providers from which the CCG procures services on behalf of the population we serve. These are:

- North Hampshire Urgent Care (out of hours doctors' services)
- South Central Ambulance Service NHS Foundation Trust
- South East Coast Ambulance Service
- Royal Surrey County Hospital

Equality and non-discrimination are reviewed in line with the requirements under Service Condition 13 of the NHS National Contract. As at December 2017 this was as follows:



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- Provision of appropriate assistance and reasonable adjustments for service users, carers, legal guardians who do not speak, read or write English or who have communication difficulties
- NHS Equality Delivery System 2
- NHS Workforce Race Equality Standard



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6. What the CCG Plans to Achieve

6.1 Equality and diversity will be embedded in the CCG's business planning objectives and will be driven by legal obligations as commissioners of services and as employers. These are set out in two duties.

6.2 The first duty is as a commissioner and an employer and is the Public Sector Equality Duty to have "due regard" to the need to:

- Eliminate unlawful discrimination, harassment and victimisation
- Advance equality of opportunity between different groups
- Foster good relations between different groups

(Equality Act 2010)

6.3 To have "due regard" to advance equality it must:

- Remove or minimise disadvantage suffered by people due to their protected characteristics
- Take steps to meet the needs of people from protected groups where these are different from the needs of other people
- Encourage people from protected groups to participate in public life or in other activities where their participation is disproportionately low

6.4 The CCGs also recognise:

- The need to take action to meet the legal duty to avoid substantially disadvantaging a disabled person when compared to a person who is not disabled
- Compliance with the equality duty may involve treating some people more favourably than others

6.5 The second duty is specifically for commissioners of services and is the duty to have regard to the need to:

- Reduce inequalities between patients with respect to their ability to access health services; and
- Reduce inequalities between patients with respect to the outcomes achieved for them by the provision of health services

(Health and Social Care Act 2012, Part 1, Section 13G)



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7. How the CCG will achieve that Plan

7.1 The CCG will set and publish one or more equality objectives to be achieved to meet the general equality duty.

7.1.1 Equality objectives will be developed from assessment against the Goals and Outcomes of the NHS Equality Delivery System 2 (EDS2) during 2018 and specifically:

- Review evidence of inequality in health and social care and in the CCG's workforce
- Gather ideas from CCG staff, voluntary and community sector organisations and local people who use NHS services
- Gather evidence from CCG staff, voluntary and community sector organisations and local people who use NHS services through a survey and face-to-face meetings. The survey will be available online and in hard copy and alternative formats.
- Engage with groups in face-to-face meetings to consider the impact of inequality and their experience of health care services
- Use guidance from the Equality and Human Rights commission on selecting and prioritising equality objectives and making them specific and measurable

7.2 The CCG will also continue to:

7.2.1 Take account of the diversity of the population served and potential barriers some people face when accessing health services with a view to reducing these. This will be achieved by:

- Ensuring Census data and data from the Joint Strategic Needs Assessment for North East Hampshire and Farnham informs commissioning projects and plans
- Completion of equality analysis to identify and mitigate or remove any detrimental effects on one or more protected characteristics in relation to the quality and safety of patient care and access to services
- Work with statutory and voluntary and community sector partners through the work of the Hampshire Health and Wellbeing Board.

7.2.2 Update the communications plan and engagement mechanisms to ensure the experiences and voices of all communities in the population served directly influence commissioning priorities, plans and delivery.

7.2.3 Monitor providers of NHS services from which the CCG commissions services on equity of access, equality and non-discrimination.



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- 7.2.4 Monitor CCG compliance against the NHS the Workforce Race Equality Standard and, from April 2018, the Workforce Disability Standard and implement action plans.
- 7.2.5 Ensure CCG staff work in an environment that is free from discrimination, victimisation and harassment. This will be achieved through:
- Essential training on equality and diversity
 - Equality and diversity training identified and delivered that is relevant to individual staff roles and responsibilities
 - Equality analysis of Human Resources policies and procedures to identify, remove or mitigate any detrimental effects on one or more protected characteristics
 - Include equality and diversity as part of the annual appraisal process

